

This is a digital copy of a book that was preserved for generations on library shelves before it was carefully scanned by Google as part of a project to make the world's books discoverable online.

It has survived long enough for the copyright to expire and the book to enter the public domain. A public domain book is one that was never subject to copyright or whose legal copyright term has expired. Whether a book is in the public domain may vary country to country. Public domain books are our gateways to the past, representing a wealth of history, culture and knowledge that's often difficult to discover.

Marks, notations and other marginalia present in the original volume will appear in this file - a reminder of this book's long journey from the publisher to a library and finally to you.

Usage guidelines

Google is proud to partner with libraries to digitize public domain materials and make them widely accessible. Public domain books belong to the public and we are merely their custodians. Nevertheless, this work is expensive, so in order to keep providing this resource, we have taken steps to prevent abuse by commercial parties, including placing technical restrictions on automated querying.

We also ask that you:

+ *Make non-commercial use of the files* We designed Google Book Search for use by individuals, and we request that you use these files for personal, non-commercial purposes.

+ *Refrain from automated querying* Do not send automated queries of any sort to Google's system: If you are conducting research on machine translation, optical character recognition or other areas where access to a large amount of text is helpful, please contact us. We encourage the use of public domain materials for these purposes and may be able to help.

+ *Maintain attribution* The Google "watermark" you see on each file is essential for informing people about this project and helping them find additional materials through Google Book Search. Please do not remove it.

+ *Keep it legal* Whatever your use, remember that you are responsible for ensuring that what you are doing is legal. Do not assume that just because we believe a book is in the public domain for users in the United States, that the work is also in the public domain for users in other countries. Whether a book is still in copyright varies from country to country, and we can't offer guidance on whether any specific use of any specific book is allowed. Please do not assume that a book's appearance in Google Book Search means it can be used in any manner anywhere in the world. Copyright infringement liability can be quite severe.

About Google Book Search

Google's mission is to organize the world's information and to make it universally accessible and useful. Google Book Search helps readers discover the world's books while helping authors and publishers reach new audiences. You can search through the full text of this book on the web at `http://books.google.com/`

Digitized by Google

Digitized by Google

Digitized by Google

Digitized by Google

Digitized by Google

764811

NEW YORK
LIC LIBRARY
ASTOR, LENOX AND
TILDEN FOUNDATIONS

SECOND ANNUAL REPORT

OF THE

State Board of Health

OF FLORIDA,

JACKSONVILLE, MARCH 29TH, 1891.

JACKSONVILLE, FLA.:
DaCosta Printing and Publishing House,
1891.

S P B
Digitized by Google

Digitized by Google

SECOND ANNUAL REPORT

OF THE

State Board of Health

OF FLORIDA,

NEW YORK
PUBLIC

JACKSONVILLE, MARCH 29TH, 1891.

JACKSONVILLE, FLA.:
DaCosta Printing and Publishing House,
1891.

Digitized by Google

THE NEW YORK
PUBLIC LIBRARY
764911
ASTOR, LENOX AND
TILDEN FOUNDATIONS
R 1917 L

OFFICERS AND MEMBERS

OF THE

STATE BOARD OF HEALTH OF FLORIDA.

R. P. Daniel, M. D., President, Jacksonville, Fla.

Wm. K. Hyer, Pensacola, Fla.

Wm. B. Henderson, Tampa, Fla.

Joseph Y. Porter, M. D., State Health Officer and Secretary, Key West, Fla.

Official Postoffice Address, Jacksonville, Fla.

Digitized by Google

PRESIDENT'S REPORT.

JACKSONVILLE, FLA., March 10, 1891.

To His Excellency, Gov. F. P. Fleming:

SIR—At your request I have prepared, and herewith transmit, this my second annual report as President of the State Board of Health of Florida.

This is somewhat in anticipation of the time at which the same document was rendered you last year, it having appeared to me that the intention of the law was that this duty should be performed at the annual meeting of the State Board, which is definitely fixed for the first Monday in May of each year. However, I readily appreciate the desirability of having all documents relative to the various departments in your hands in time to utilize in the preparation of your message to the Legislature; and I have therefore endeavored to act upon the expressed wish of Your Excellency in anticipating somewhat.

GENERAL HEALTH.

It is with gratification that I am able to report that while the general health of the State has not been exceptionally good during the past year, there has, nevertheless, been no very serious epidemic, and the mortality rate has been favorable.

Dengue prevailed in Tampa and some other towns in South and East Florida during midsummer and early fall; it was limited in extent and duration, and mild in character.

The wide spread and very serious prevalence of catarrhal fever, or "grippe" as it is properly known, has reached and prevailed extensively over the State during the past three months.

With these exceptions we have been remarkably free from epidemic disease of any kind since I had the honor to render my former report to your Excellency.

It may not be out of place in this connection, however, to call attention to the very considerable proportion of deaths from consumption, as presented in our monthly reports of vital statistics. This is undoubtedly due to the fact tnat pulmonary in-

Digitized by Google

valids have been, and are, drawn to Florida by the advantages and attractions of its climate; and thus no inconsiderable proportion of the population, resident as well as transient, belongs to this class; and we are consequently charged up with what we are not responsible for.

The value of a State Board of Health to the public welfare, both in health and pocket, has been demonstrated during the year on two occasions in connection with alarms from reported disease.

In July of 1890 a death occurred in St. Augustine under circumstances justly calculated to cause popular disturbance and alarm. The local Board was unable to handle the situation promptly; a panic with resulting stampede and all its direfud consequences to that city, as well as the entire State, was imminent. The State Health authorities were appealed to; the latter took action, immediately, authoritatively and thoroughly; and in less than twenty-four hours the threatened calamity was effectually averted. The State Health Officer being, at the time, in Key West, and consequently not available promptly, I solicited the aid of Dr. Chas J. Burroughs, Health Officer of Jacksonville, in connection with this particular emergency. It affords me pleasure to testify not only to the cheerful readiness with which this gentleman responded to my request, but likewise to the skill and discretion displayed by him in the execution of so delicate a duty.

The other occasion to which I refer was when the commendably prompt notification was made to our Board by the Health Officer of Savannah, of the recognition of a few cases of small pox in that city. The occasion and conditions have been so successfully utilized by the health authorities of this State that I feel warranted in asserting that a large majority of our previously unprotected population has been vaccinated; and we have thus not only been able measurably to guard against any serious development of a most dreaded disease, but, likewise, to demonstrate that the regulation of the State Board in regard to vaccination can be enforced without detriment to the immediate interests of the people, educational or otherwise.

There have been, during the past three months, more than six thousand vaccine points supplied through our office to various

Digitized by Google

towns and counties in the State; our Secretary having made such arrangements as enabled him to furnish virus at cost to all who call upon him.

RELATIONS WITH OTHER HEALTH AUTHORITIES.

These have been, on the whole, satisfactory, and it is with special gratification that I am permitted to express my high appreciation of the confidence reposed in our integrity—and ability—as guardians of the public health, and as holding an important outpost in danger, from without, by the various health authorities of our neighboring States, more particularly by those of Brunswick, Savannah and Charleston; all of which cities being prominently endangered by any neglect or error on our part.

It is with regret that I must, in this connection, make an exception against the Board of Health of Louisiana. This body has deemed it advisable to place a special inspector in Florida during each quarantine season, for the purpose of espionage and report. This action I have deemed both unjust to us and discreditable to the interests of public health protection, and have formally protested against such course.

It is to be hoped, however, that the provision which has been made at the entrance of Tampa Bay by the State Board of Health for instituting those methods of protection against invasion of Yellow Fever through that and adjacent ports, deemed necessary by the health authorities referred to, may, in the future, remove their anxieties and apprehensions that Florida is a menace to New Orleans. You will please find herewith copies of correspondence on this subject between the President of the State Board of Health of Louisaina and the State Health authorities of Florida.

ASSISTANT STATE HEALTH OFFICER.

In accordance with that section of the Act creating a State Board of Health which requires that there shall be appointed an Assistant State Health Officer, I would report that Dr. J. Louis Horsey, of Fernandina, was, at the meeting of the Board in January last, elected, and has accepted an appointment to this office, which was made vacant by the resignation of Dr. W. H. Ross, of Pensacola; and the Board has reason to congratulate itself upon having secured for this position a gentleman who is so competent to assume the responsibilities which he may be called upon to meet.

Digitized by Google

WORK ACCOMPLISHED.

For the work accomplished by the Board I shall refer your Excellency more particularly to the report of the State Health Officer and Secretary, which is hereto appended.

There has been some progress made in securing co-operative action on the part of County Boards of Health in the collection and forwarding of vital statistics; but I am persuaded that far more satisfactory results could be obtained by an amendment to the law under which we operate, and which you will find more particularly indicated under the proper caption.

It was not to be expected that there would be a popular appreciation of this element of the work of a Board of Health. It has nothing in it sensational, or calculated to enlist the interest or sympathy of the people; and not unfrequently the enforcement of it presents the offensiveness of an intrusion into the private affairs of individual citizens.

There can be no doubt, however, of the very great value, both from a sanitary and business standpoint, of such statistics when fully and reliably collated for a sufficient length of time; and this is particularly of force as relating to Florida: hence my suggestion as hereinafter made.

There have been employed by the board during the quarantine season of 1890 five inspectors—one each at Port Tampa, Punta Gorda, Punta Rassa, Sarasota, and on the Manatee river.

It has appeared advisable, in view of the constancy and extent of intercourse between that point and Havana, to keep one inspector permanently on duty at Port Tampa, or at least until our quarantine station about being opened at Mullet Key can be put in operation.

There could well be employed, under the direct control of the board and with large advantage to the interests involved, special inspectors at several other points on the Gulf coast of our State, did the financial resources of the former warrant. Indeed, I have become convinced that were the whole machinery of Port Sanitary Inspection and Quarantine placed under the immediate control and direction of the State Board of Health, and operated by employees directly responsible to and paid by this body, that the latter could more efficiently and effectively

Digitized by Google

execute its own duty and more securely protect the public health and interests.

The board has, as indicated in my last report to your Excellency, erected, through responsible contractors and under competent and careful supervision, a Quarantine and Disinfection Station on Mullet Key, near the entrance to Tampa Bay. This Quarantine Station will be furnished with all necessary appliances required to accomplish the greatest protection against risk of importing infectious or contagious disease, with the least amount of detention to travel or obstruction to traffic practicable.

It is not contemplated that vessels on which Yellow Fever, Asiatic Cholera or Small-pox may prevail, at the time of their arrival, shall be detained and cared for at this station; unless the demands of humanity should imperatively require this course. Such vessels will be ordered to the nearest United States Refuge Station.

The methods and appliances which are to be employed at Mullet Key are similar to those already in successful operation at New Orleans and Charleston, and which have received the endorsement of the highest public health authorities of our country.

It affords me much gratification to be able to report that the Board of Health of Escambia county has had the wisdom to contemplate, and financial ability to construct, an establishment of a similar character on Santa Rosa Island, near Pensacola. This latter city certainly has claim for congratulation that her health board is possessed of qualities which have enabled it to attain so enviable an ability to protect the health and facilitate the interests of her citizens.

It is the desire and intention of the State Board of Health, so soon as its pecuniary resources will possibly permit, to erect and operate at Key West a plant of similar character to that which is just being completed at Mullet Key. The Board fully appreciates the extraordinary difficulties which are liable to present themselves at the former port in the execution of its duties; and, likewise, the peculiar hardships that may temporarily result therefrom, to private interests; and consequently it feels that these conditions must be rendered less difficult and onerous so soon as it is possible to do so. Let us hope that it will not re-

Digitized by Google

quire a long lapse of time to see, not only the accomplishment of this, but likewise the erection of similar plants at Fernandina and Apalachicola, or even at other points of our State, if such provision should be deemed needful.

The necessity of some reliable means of communication with Mullet Key Quarantine Station and the impracticability of utilizing the ordinary channels of public transportation for this purpose (more particularly during the period of active operations in quarantine) have induced the Board to authorize the purchase of a small steamer for the purpose above named; and accordingly, the State Health Officer and myself, with the counsel and approval of such reliable men of practical knowledge in this line as we were able to consult, purchased, in the name of the State of Florida, a small propeller, comparatively new, which had been owned and used as a yacht by Mrs. Carnegie, for the sum of five thousand dollars.

In searching for and selecting a steamer for the purpose as above named it was deemed a matter of no small consideration to procure at the same time, if possible, a vessel with some sea-going qualities. Your Excellency will, doubtless, recall the fact that I have from my first connection with the office of President of the State Board of Health urged the importance of providing more effectual means, than such as were at our command, to control and suppress as far as possible, the irregular and irresponsible intercommunication between certain portions of the Gulf Coast of Florida and the West India Islands, and more particularly the port of Havana.

The importance of taking action in this matter and our own comparative helplessness to deal with the situation was urged upon the Federal authorities at Washington through every avenue which suggested itself as advisable; but it is only within a few weeks that the first response has been made to our appeals in the form of a suggestion or request from Surgeon-General Hamilton of the Marine Hospital Service to the Secretary of the Treasury that a light draft steamer should be built and commissioned for the purposes and service which I have indicated.

Meanwhile we have been and are compelled to carry this responsibility and danger; and, in addition, have on at least one occasion had our authority defied and our agent personally mal-

Digitized by Google

treated by one of the vessels engaged in keeping up this undesirable and (I believe) illegal form of intercourse with our coast. Therefore, in the purchase of a steamer the State Board of health had in view the importance, indeed I might say necessity, of providing such a vessel as might possess some sea-going qualities; and, thus, in addition to performing the duties of a tender and supply boat to the quarantine station, that she should be utilized as a patrol boat along the adjacent parts of the coast.

We hope that this object has been measurably secured in the purchase made; and we are assured by those who should be able to claim authority in such matters, that we have obtained the boat at very favorable figures.

RECEIPTS AND EXPENDITURES.

Up to the date at which my former annual report was rendered, viz: May, 1890, there remained an unexpended balance of the special appropriation of $50,000 made at the special session of the Legislature in 1889 for public health purposes, and placed at the disposal of the State Board of Health, the sum of $38,594.75.

It was, of course, calculated that, in addition to this balance, the sum resulting from the half mill tax ordered and provided for in Section 20 of the Act "to create and establish a State Board of Health," which is directed to be levied annually and set aside as a special fund for public health purposes, would be available; and that the proceeds of this levy for 1889, say $42,000, was at the service of the Board. With this calculation, and when about to make contracts and commence the erection of the Quarantine and Disinfection Station at Mullet Key, we were informed, upon inquiry at the office of the Comptroller, that the half mill tax, ordered to be made for public health purposes, had not been included in the levy for 1889. After consultation with your Excellency, and through the public spirited assistance of certain citizens, Dr. Porter effected an arrangement by means of which we have been able to prosecute the undertaking at Mullet Key to a successful conclusion. Later on, I, almost by accident, was made aware that the State Board of Health was about to lose in a similar manner the revenue provided by law for its use for the year 1890. Upon representing the situation to your Excellency, and likewise to Hon.

Digitized by Google

W. D. Bloxham, who had recently succeeded General Barnes in the Comptroller's office, the difficulty was rectified, so far as it was possible to do so.

There has been, consequently, only the unexpended balance of the appropriation of $50,000 and the half-mill assessment of 1890, say $42,000, from which to draw; and, indeed, I do not understand that the latter sum has all been placed to our credit up to this date.

The following statement will present, in a summarized manner, the expenditures, both ordinary and special, which have been made with my approval since my last annual statement was rendered, and for all of which itemized accounts, with proper vouchers, have been filed in duplicate; one being sent to the Comptroller's office and the other kept in the office of the State Board of Health.

FINANCIAL STATEMENT.

Mileage and per diem of members	$ 282 80
Office rent and furniture	322 77
Pay and traveling expenses of Health Officer	2,858 20
Clerical help and Inspectors' salaries	5,205 40
Telegraphic service	70 59
Legal expenses	256 85
Stationery, printing, etc	693 50
Erecting Quarantine Station, etc	24,470 42
Incidentals	460 02
	$34,620 55

MEETINGS OF BOARD.

The Board has held three meetings during the past twelve months—the annual meeting in May of 1890; a called meeting in January, 1891, for reconsideration of its rules and regulations, as well as for other important matters in connection with the duties of its work; and last, in February, a called meeting at Mullet Key for the purpose of inspecting and passing upon the work of the contractors for constructing the same. The Hon. W. K. Hyer, I regret to add, in this connection, was unable to be present at this last meeting of the Board, owing to personal reasons beyond his control.

Digitized by Google

RECOMMENDATIONS.

In conformity with a provision of the law under which the President of the State Board of Health is required to render this annual report and which defines that he shall include therein "any special observations, recommendations or facts * * * that would be conducive to the health and sanitary condition of the State," I herewith respectfully submit recommendations for certain amendments to the law under which the State Board of Health was organized and is operated:

First, The Board should be vested with corporrate powers. This is the case with most other bodies of a similar character, and my experience induces me to believe that its work would be facilitated and its methods improved by said change, without lessening its responsibilities to the Executive of the State.

Second, I am persuaded that there would result an increase of efficiency as well as economy in the execution of the work of the Board if there was a provision by which the President and State Health Officer were constituted an executive committee with plenary powers *ad interim* of the sessions of the Board of Health.

Third, The status of the State Health Officer on the Board is not in keeping with the responsibilities and requirements of the office which he holds and the duties which he is expected to perform. *He should be made a member of the Board*, and thereby given a voice in the proceedings. This is the custom with the large majority of State Boards of Health, and I believe that such a relation between the State Health Officer and the Board would promote efficiency.

Should it appear advisable in view of the fact that such modification of the law would make the Board consist of an even number (four), which might, at some time, prove awkward, I would additionally suggest that the Governor be made a member. As it is he who has to be consulted on many occasions in connection with its work.

I would suggest that the State Health Officer be made Registrar of Vital Statistics for the State, and that the Governor be empowered to appoint, upon application of said registrar, endorsed by the President of the State Board of Health, a *County Health Officer* for each county, or counties, as may appear need-

Digitized by Google

ful; said officers to be medical men and paid small salaries out of the funds appropriated for public health purposes. Their primary duty should be the collection and forwarding to the office of the State Board, at such intervals as may be designated, reports of the births, deaths and marriages, which occur in their several territories; as well as any other information which might be of value to the Registrar.

These officials might be required, additionally, to attend, professionally, the county jail and hospital; and indigent sick, when practicable for them to do so.

Section 9 of "The Act to create and establish a State Board of Health" empowers the State Health Officer, by and under the direction of the President of the Board of Health, to assume full control of any situation in which there may be recognized the presence of yellow fever, small-pox or cholera. There should be added, "or any other contagious or infectious disease." Diphtheria and leprosy as well, possibly, as other diseases of a like character might require to be dealth with. There should be given to the State Health Officer discretionary power to take similar action, whenever in the interests of the public health and the prevention of disease it may appear advisable. It is true that in Section 12 there is given authority to this officer, and directions in regard to the condemnation and destruction of any material or property that, "in his judgment, shall be likely to produce or cause the spread of any epidemic diseases;" but a greater latitude of discretionary power in this direction would be for the good of the people.

Section 12 also directs that "it shall be the duty of the State Health Officer, between the first of November and the first of May of each and every year, and oftener if deemed necessary by the Board, to visit all the cities and towns or other points where two or more railroads meet, in the State of Florida, which in the judgment of the Board it may be necessary for him to inspect, etc." The literal and thorough execution of this requirement has been found in the first place impracticable, without the utilization of the Assistant State Health Officer, and a large expenditure of money for mileage. It has been impossible for the State Health Officer to accomplish the performance of this requirement in addition to his other duties; and it does not appear to me that the additional expenditure would have been advisable.

Digitized by Google

The Health Officer has visited and inspected, from time to time, such points in the State as appeared most to require special attention.

I would suggest that such detail be left to the discretion of the State Board, or its accredited representative.

These are the only suggestions which I have to make, and are respectfully offered for your consideration.

Your Excellency will please find hereto appended originals or copies of papers necessary to exhibit in detail the various matters briefly noted in this report.

I would especially ask your attention to the report of State Health Officer Porter, which is ample on all subjects appertaining to the duties of that officer.

I am, Sir, Most respectfully,

R. P. DANIEL, M. D.,
PRESIDENT STATE BOARD OF HEALTH.

Digitized by Google

Digitized by Google

HEALTH OFFICER'S REPORT.

JACKSONVILLE, FLA., March 29, 1891.

To the President of the State Board of Health, Jacksonville, Fla:

DOCTOR—I herewith hand you, for transmission to the Board of which you are the honorable representative, and also for the information of the public generally, my report of the transactions of my office for the past year.

GENERAL HEALTH OF THE STATE.

It is certainly a matter of congratulation that no case of Yellow Fever has been reported during the past twelve months; and that I have been called upon to investigate but few suspicious rumors of this disease. No fatal epidemic of any disease has prevailed, and the mortality from all causes was less in the summer months than in many other States; and it can be said that the general health of Florida has been fairly good. The general prevalence of Dengue during the summer and fall, particularly the southern and eastern portions of the peninsula, though fatal in only one instance—case in Leon County—was a source of much uneasiness and anxiety to those whose temperament and predilections tend to panics. This was true of some of the southern counties, for when dengue was first recognized and reported from Tampa, citizens in the counties adjoining became alarmed and were desirous of a prohibitory quarantine against Tampa, and probably would have obtained it under the old order of things of sole vested rights in County Boards of Health, but the Board under its regulations was able to prevent a panic and suspension of trade in the closing up of the avenues of commerce of a thriving city.

Numerous inquiries as to the nature of the disease at Tampa are on file in this office and confirm the above statement.

Dengue was promptly recognized and reported in Tampa, and there was no attempt made to conceal its existence, as the communications hereto appended show.

Digitized by Google

By promptly answering all queries in regard to the prevailing disorder the alarmists were disarmed and quieted, and the public learning of no fatal sequence soon ceased to pay any particular attention to the matter.

Epidemic Influenza, known as "La Grippe," has had an extensive hold upon the whole State since early fall: Cases have not been confined to any particular age or locality, and have been fatal only from sequences affecting weak organs, and from relapses in convalescence due to imprudent exposure. Medical opinion is not unanimous in reference to the true nature of this disorder, nor does it appear that there is a general disposition to accept the term "La Grippe" as entirely applicable in diagnosis. Some physicians incline to the designation for want of a better term, while others maintain that the disease is the Epidemic Influenza, or Catarrhal Fever, of the older writers.

Diphtheria has occurred in Escambia, Lake and Putnam counties, but under the careful supervision of the County Health authorities the disease was suppressed.

Typhoid Fever has prevailed at several points, due, I am inclined to believe, to lack of observance of sanitary requirements, and in the future should be prevented by individual attention to those hygienic principles which demand, for the preservation of health, pure air, pure water and wholesome food.

Consumption has caused a number of deaths. It is to be regretted that the reports do not all show the nativity of those dying from this disease, in order that it could be authoritatively stated, as is confidently believed, that consumption is not a prevalent disease among native Floridians. It is plain that many hopeless cases are sent into the State merely for the sake of temporary relief, which add largely to the death rate.

The Koch method for the cure of consumption will more likely be successful in a climate, mild and balsamic in character, and it is to be hoped that a fair trial may be given it at St. Augustine and other places. Benefits are too often prevented by delayed coming to Florida; the disease, except in rare instances, being always fatal.

The annexed table states the mortality, and the causes of the same, in the several counties of the State.

Digitized by Google

GLANDERS.

The health of live stock has also engaged the attention of the Board, and precautions have been taken to prevent the introduction of contagious diseases from other States. Press reports stating the general prevalence of glanders in several of the counties of Texas was made the basis of inquiry of the State Health Officer of Texas and of the National Commissioner of Agriculture. The latter promptly replied:

An outbreak of glanders is said to exist at Cuero, Texas. Have commissioned a veterinarian to investigate. His report is not received, hence cannot state to what extent the disease prevails.

(Signed) J. M. RUSK, Secretary.

A circular was at once issued interdicting the importation of cattle into this State from points west of the Mississippi and south of the Arkansas rivers, and all County and City Boards of Health, together with the transportation companies, were notified of this action. Subsequently when Glanders appeared in Georgia its existence was confirmed by the following from the Commissioner of Agriculture of that State:

Yours of the 28th to hand, and contents noted. In reply I will say that the clipping quoted referring to Glanders in lower Georgia is substantially correct. Its prevalence in some counties is alarming.

Restrictions were then placed upon the introduction of stock from that State, and it is believed that these precautions and restrictions have prevented the introduction into this State of this contagious disease, but in neither instance was a prohibitory quarantine instituted before communicating with the proper authorities of the States of Texas and Georgia. Several days after telegraphic and mail request for information had been sent him, the State Health Officer replied in the following telegram:

After careful investigation no Glanders found in Texas. Authority for this statement forwarded by mail. Notify me if this releases the State from further embargo.

(Signed) R. RUTHERFORD, S. H. O.

But action had already been taken upon the prompt information furnished by the Department of Agriculture of the general Government.

Digitized by Google

The restrictions on the importation of Texas and Georgia live stock were removed as soon as it appeared that the disease had been controlled and suppressed in those States.

INVESTIGATION OF SUSPICIOUS RUMORS.

On April 5, 1890, the President of the State Board of Health received the following from Dr. R. A. Lancaster, President of the Alachua County Board of Health, dated Gainesville, Fla., April 4, 1890:

DEAR DOCTOR:—Yesterday I received a telegram from Dr. Strickland, of Waldo, as follows: "Sudden death here. I think coroner's examination necessary. What is law? Give me light"

I supposed that it was a case of suspected poisoning, or something of the kind, so telegraphed him: "Have justice of the peace hold inquest and if he deems it necessary let him have *post mortem* held." This afternoon about six o'clock I received the enclosed letter from him. I would have telegraphed you but disliked to wire what might cause the public useless excitement, and thought that since the body had already been interred a letter would do, and I could write more particularly. I see that the law requires that I write you and not the Health Officer.

I hope that you or he can go to Waldo and ascertain whether the suspicions are sufficiently strong to make it desirable to quarantine those exposed, to disinfect, etc. If the County Board of Health has any duties in the premises please inform me.

Copy of letter enclosed with above communication:

Dr. Lancaster:

DEAR DOCTOR—It seems as if you did not understand my telegram, and I didn't receive yours in time to do anything before they buried patient yesterday, so I will write you this eve. I was called to see Mrs. Strait between twelve and one o'clock yesterday morning. I got to her bedside about one; found her collapsed, could not arouse her; at six she died with black vomit I could get no history from her husband. Dr. Cushior had been sending her medicines since Tuesday; he did not see her. All that I could get was that on Sunday she was taken with pain in stomach followed by chill, then fever and vomiting. She came here last Saturday from South Florida. From what station I do not know, and the reason I telegraphed you was because the people near here thought it Yellow Fever and wanted a *post mortem* held. I did not know what to do, so

Digitized by Google

I sent you a telegram for advice. I could not get enough history of symptoms to form a diagnosis without a *post mortem.* She was buried early yesterday eve.

Yours respectfully,

(Signed) GEO. W. STRICKLAND.

I immediately left for Waldo and had an interview with the attending physician. The result of the same is given in a report to the President of the State Board of Health, under date of April 12, 1890:

SIR:—In conformity with your request of the 6th inst., that I would proceed to Waldo, Fla., and examine into the circumstances attending the death of Mrs Strait, which had been reported to you by Dr R. A. Lancester, President of the Alachua County Board of Health, I have the honor to inform you that I left on the train next following our interview, namely, at 11:25 A. M. of the same date. I had previously wired Dr. G. W. Strickland, under whose professional care the patient above referred to had been, and he met me at the hotel.

From Dr. Strickland I learned the following history of the case: Mrs. Strait had been at Georgetown, a small settlement in the southern portion of the State—I take it to be near Sanford, as I know of no other settlement of that name (on this Dr. Strickland could give me no more definite information)—where she had been in the service of a family, who, the Doctor informed me, had suffered a good deal from malarial fever during the winter. On Saturday, March 29th, she returned to Waldo and went to her father's home on Santa Fe Lake, four miles from Waldo. On March 30th she was taken with a chill and had fever. Dr. Strickland says he first saw the case on Tuesday morning, the 3d inst., about one o'clock; the patient was then moribund, being cold to her shoulders and above her knees; she complained of pain in her abdomen and winced on pressure being made over left portion of same; abdomen slightly swollen. He administered digitalis and several anemas, and was preparing a "toddy" when, about 6 o'clock, she vomited dark, offensive matter, and died during the vomiting. At no time was the vomiting free or unaccompanied by retching, nor was there a gush of fluid from the mouth without premonitory nausea.

The Doctor further said that about Tuesday the people at the house told him she had commenced to swell and there was some distension of the abdomen when he arrived He learned that she had taken on Tuesday some powders of rhubarb and soda, but he could not learn of any history of diarrhœa or dysentery or peritonitis. He said that his desire was to have a *post mortem,* and returned to town for that purpose, but failing to get any one to assist him he telegraphed to Dr. Lancaster for instructions; the Doctor

Digitized by Google

evidently misunderstood him, and before he could explain and get a further reply the patient was buried. The Doctor was unable to say what he considered to be the cause of death, saying he saw the patient too late to form any intelligent diagnosis. Upon his asking me what I considered the patient to have died from, I replied that it was impossible with the brief and incomplete history, as given by him, to form any intelligent opinion, but I certainly did not think the death was caused from any contagious or infectious fever. The patient having been dead four days. I did not consider it advisable to exhume the body as there would have been *post mortem* changes to such an extent as to preclude the possibility of determining the cause of death, except said cause had been from poisoning, of which there was no reasonable suspicion.

The case had made some little talk in the immediate neighborhood, but at the time of my visit, the Doctor informed me, had about died out. No other member of the family had been sick or was sick, and I, therefore, did not consider it advisable or necessary to pursue investigation further.

I think that it can be safely stated that, although the history is incomplete, and in a great measure unsatisfactory, Mrs. Strait did not die of Yellow Fever.

The occurrence of the first cases of Dengue at Tampa, Fla., called for investigation on account of the uneasiness of the general public as to the term "Dengue." The result, in a report to the President of the State Board of Health, showed the groundlessness of any fears in associating the cases or claiming any identity of them with Yellow Fever.

Early in June a letter received from Dr. R. D. Murray, of Key West, gave information of rumors current in that city from a Tampa correspondent, of a suspicious sickness in Tampa. The correspondent, a resident of Ybor City, had written, so it appeared, that the mortality in that Ward of Tampa was very great, and that said sickness was Yellow Fever, the existence of which the Health Officer of the State was cognizant, and concerning which Dr. Wall, of Tampa, was desirous of suppressing all information. I immediately visited Tampa, and the following report, under date of July 14th, to the President of the State Board of Health, explains, as I had anticipated, the absurdity of the rumors referred to:

SIR:—In compliance with your instructions to visit this point and investigate the subject matter of a letter from Dr. R. D. Murray, Surgeon United States Marine Hospital Service, at Key

Digitized by Google

West, Fla., which stated that a rumor was current in that city of of the existence of Yellow Fever at Ybor City, I arrived here last evening, and have spent to day in investigating the subject of Dr. Murray's letter.

I have seen all the doctors in Ybor City, Fourth Ward of Tampa, namely: Drs. Barbarosa, Terga, McChado and Carballo, who positively deny the existence of anything approaching the type of Yellow Fever in that Ward, or, to their knowledge, in the city of Tampa.

The case that Dr. Murray alluded to was a patient of Dr. John A. Jackson. The girl died of Typhoid Fever, as per copy of certificate which is attached to this letter, and was sick for over three weeks. I find tnat there have been six cases of Typhoid Fever in Ybor City within the last three months, three resulting fatally—one a Spanish male, one an American male, and this girl, who was also an American.

I have carefully gone over the house to house inspection reports (Form No. 13) which are carefully kept, and have diligently inquired of Drs. Wall, Weedon and others, as to the existence of fever of suspicious character that might have been confounded with Yellow Fever; to all queries I have received negative answers.

Therefore I pronounce the rumor as false and the statement as made by the correspondent from Ybor City to the correspondent at Key West, made mention of in Dr. Murray's letter, as also false.

On the 22d of July the city of St. Augustine was thrown into excitement by rumors of a suspicious case of fever having terminated fatally. The patient was a Mr. Edgar L. Warren, a young man lately from Key West. The house where the young man died, together with the inmates and those who had gone to the assistance of a brother of deceased, and the Rev. Mr. Linn, a personal friend, were quarantined, and I learned from persons there that it looked at one time as if a panic and general stampede was threatening. The President of the St. Johns County Board of Health wired the President of the State Board of Health in cipher: "Suspicious case Yellow Fever," which was replied to: "Telegram received. Refer you to Rules and Regulations of the State Board, Section 1, Communicable Diseases, until Health Officer arrives;" and being absent at Key West, I was wired to return at once. The excitement and uneasiness increasing, due to the mysterious actions and intimations of the attending physician; Dr. Daniel, the President of the State

Digitized by Google

Board, left for St. Augustine, accompanied by Dr. C. J. Burroughs, of Jacksonville, who I had appointed as my deputy in this particular instance, there being no Assistant State Health Officer. The report of the investigation of the case and *post mortem* is appended.

My absence from the office at this time was unfortunate, as from personal knowledge of the patient and of his perfect acclimation, I could have at once disproved, to the satisfaction of every one, even without the corroboration of a *post mortem*, that Edgar L. Warren did not die of Yellow Fever. So confident was I of this fact, that from Key West, without knowledge of said *post mortem*, I wired the President of the County Board of Health to ship the remains home for interment. The suspicion of Yellow Fever seemed to attach itself to the death of the lad because he came from Key West; attention given to the statements of his brother and personal friend, Mr. Linn, of the boy's lifelong residence at Key West and thorough acclimation should have dispelled all such fears, to say nothing of the symptoms and history of the illness, which bore no analogy to a case of Yellow Fever. The history of this case bears out former statements that nervous and panicky people exist everywhere, and a central health authority, upon which local pressure has no effect, is needed to protect the people from injuring themselves and their business.

Leprosy has been known in the United States to a limited extent for many years. Segregated colonies are in Minnesota and Louisiana, and I do not suppose there is a State in the Union where a case of Leprosy cannot be found. That there has been no general spread of the disease is due, I am of the opinion, to its limited contagious properties, and the repulsive appearance of its victims, which would of itself have a tendency to seclude those unfortunates rom the general public. They carry upon the countenance the stamp of the curse, which disfigurement would cause them to be shunned and avoided, and in the shunning lies the protection of the great public.

The subject of Leprosy has had the especial attention of sanitarians, the various State Boards of Health and the public press during the past year. Discussion on the extent of the contagious character of the disease was had at the National

Digitized by Google

Conference of Boards of Health, held in Memphis last May, when separate reports on this subject were made.

The American Public Health Association noticed the question at its recent meeting, and the United States Marine Hospital Service, acting as the National Health Bureau, has issued instructions for strict inspection of shipping from foreign ports, intended to prevent the introduction of lepers into the United States through that channel.

Places and individuals suffer alike from the flings of their neighbors, as they advance in prosperity in the mercantile and commercial world. Florida has been no exception to this rule. Rival companies or individuals, jealous of the general prosperity of the State, have tried various ways, through reflections upon its health, its coast protection system and its cigar industry, to effect that which legitimate competition in trade has failed to accomplish.

Through malice and with the evident desire to injure the cigar industry in Florida, some evil minded individuals circulated rumors through the Northern press of leprous workmen being employed in the cigar manufactories in this State.

The case of the young student, a leper, who was forcibly taken from his home in New York City to North Brothers Island Hospital, stimulated the sensational reporter and correspondent to increased efforts in this field, and a press dispatch, at Washington, about this time, asserting the existence of cases of Leprosy in Key West, gave an opportunity to the New York papers to work up additional sensational articles of employment of lepers in the cigar factories in Tampa and Key West.

These libelous and false statements regarding a prominent industry of the State threatened if not to injure it permanently, at least to seriously embarrass temporarily the sale of cigars from these places The State Health Officer of Texas thereupon placed an embargo upon freight and passengers from Key West, and forbid the Mallory Line of steamers en route from New York to Galveston having communication with the city. Quite an excitement over this prohibition, which was considered in the light of an outrage, prevailed at the time of my arrival in Key West. I immediately communicated by wire and mail with Dr.

Digitized by Google

Rutherford, stating the groundlessness of his fears, with the happy result of liberating the restrictions on the tobacco freight.

The city commissioners of the Key West municipality ordered an investigation through the City Health Officer of these rumors, but beyond a meeting of a few of the medical men of the city, and a general discussion, nothing was accomplished. At that meeting it was proposed to personally visit the manufactories and inspect the workmen therein; also to visit and report upon any individuals thought to be suspicious as to leprosy. A committee was appointed for the purpose, but nothing further was done, as the pay demanded by the committee for performing this service was refused by the city commissioners, neither were the manufacturers willing to contribute to the expense of any investigation.

In 1888 one Burger, claiming to be an expert in leprosy, suddenly appeared in Key West, and reported to the Secretary of the County Board of Health that he had found upwards of one hundred cases. An investigation failed to sustain the truth of his statement, and his meddlesome and impudent intrusion into private families provoked for him a horse-whipping which hastened his departure for Tampa, where, pursuing the same policy, he fell into similar trouble.

Although the State Board of Health of Florida has at no time been officially notified of the existence of leprosy in Key West, yet I do not deny, nor have I any authority for doing so, that cases, isolated in character, have not heretofore prevailed in the place; indeed, it would be strange had not isolated cases occurred, in view of the, until very recently, unrestricted and uninspected communication between Key West and Havana and Nassau. Physicians of reliability have told me that leprosy has been treated in Key West by them. They never knew, however, of many cases; certainly not more than six or eight at one time, and of late years through death the number has been decreasing. These unfortunates were kept off the public streets, and in no instance was the disease communicated to any other member of the family.

I believe the charge of employment of lepers in cigar factories to be without confirmation, as the pecular deformity in leprosy and particularly in the fingers and hands, would positively pre-

Digitized by Google

vent manipulation of tobacco with that dexterity and mechanical skill so necessary in the manufacture of cigars; besides this, and an argument of equal potency, the other employees would not tolerate the presence of a leper among them. They, with the entire community of Key West, have a deadly fear of this disease.

The above are the only investigations that have been demanded during the past year, and only called for mild action, as the reports thereon show.

VITAL STATISTICS.

The collection, compilation and publication of the births, marriages and deaths occurring in Florida, have engaged the earnest attention of the office during the past year, but the vital statistics record for the State has not been as full as is desirable; still the reports received have been sufficient as a basis for estimates, hence do not consider the expenditures for this purpose as thrown away.

The tables contained in this report will convey what has been accomplished during the year.

I advise that a bureau of vital statistics for the State Board of Health be provided for by legislative enactment to collect the vital statistics of Florida, and a system for making the record should be defined by statute. An appointee of the Governor in each county, paid from the State Board of Health's special fund, should be provided for. He could collect all matters of *vital* interest and forward the same to this bureau monthly. In this way a reasonably accurate record would be had, and statements based thereon would be reliable.

The difficulty in obtaining accurate statistics was alluded to in the first report of the Board where it was stated that the only way that seemed possible to overcome the difficulty was for the State Board to take the matter in hand and establish a statistical bureau, appointing inspectors, who would ascertain the sanitary condition of the different sections of the country and remind physicians and others of the necessity of keeping a full record of the births, marriages and deaths, and report the same. This suggestion is here renewed. The importance of this portion of the State Board of Health's work is necessarily educational to the masses and cannot be expected to arrive at a stage of perfec-

Digitized by Google

tion at once. Viewing the experience of other States in this respect I feel that much more has been accomplished with us in the short space of two years than in other States. Many more counties and places made reports of their vital statistics and general sanitary condition during the past year than in 1889, and the reports were better and more intelligently compiled; therefore I feel encouraged to hope that each year will find this division of the work of the Board greatly improved—a continuance in the increase of the number of counties heard from, with more accuracy in detail.

The value of vital statistics is so lucidly portrayed by Dr. Lindsley, of the Tennessee State Board of Health, in an article on vital statistics in the *Bulletin*, and, being as applicable to Florida as Tennessee, may be quoted here:

As the value of facts have long been acknowledged in the less complex branches of human knowledge, so in recent times it has been perceived and acknowledged in those more intricate and complicated topics connected with Government and social conditions. Hence "statistics" has become one of the distinguishing marks of a civilized as contrasted with a barbarous people. * * * *

The most important of all information is the movement of the great life wave. Is a people going up or is it going down, or is it at a stand-still, as a whole, as compared with neighboring nations? The digest of facts embraced under the term "vital statistics" alone gives an answer to those questions of fundamental concern to rival governments. Again, does one section or division of a great people compare in the movement of life with another? How does Georgia compare with Tennessee, or Massachusetts with North Carolina, or California with New Jersey? Vital statistics must give the reply. Or, more minutely still, how do different countries or divisions of the same State contrast with one another?

VACCINATION.

Vaccination has had an impetus and has been quite generally discussed and performed during the past year. Before the school term opened in October the Orange County Board of Health set a laudable example to the other counties in the State in vaccinating all children, and demanding a certificate of protection to small-pox as a pre-requisite for admission to the public schools of that county.

Digitized by Google

The cases of small-pox at Savannah, on the Charleston and Savannah railroad, at Mobile, and in Texas, awakened the hitherto apathetic authorities to the necessity of looking after the public welfare in this particular, and large orders for vaccine virus from all sections of the State have been, and are still being, filled from this office.

The following, taken from the *Sanitary News* and the *Medical Bulletin*, is decidely pertinent to this discussion and is given as showing the protective power of vaccination against the mortality from small-pox:

There could scarce be a more striking object lesson, says the British *Medical Journal*, as to the value of vaccination if thorougly carried out, than is afforded by the example of Holland. Between 1870 and 1873 there were 20,575 deaths from small pox in that country. A stringent law was then enacted making vaccination compulsory, with the result that the small-pox mortality has since steadily diminished from year to year. During 1890 only one death from small-pox has so far occurred in the whole of Holland.

If anything in medical practice could be regarded as finally settled by the testimony of overwhelming experience of a century's duration, it would be the inestimable value of vaccination as a prophylactic measure. A century ago epidemics of small-pox raged like a plague. Countless graves, scarred faces and sightless eyes were grim evidences of its power. To-day, thanks to vaccination, epidemics are neither so frequent nor so virulent; the blind orbs and pock-marked face are comparatively rare. Notwithstanding these patent facts, we may still hear the efficacy of vaccination denied. And, to crown the marvel, not only uninstructed or cracked-brain laymen, but medical men of high reputation, misled by fatal subtlety and learned ignorance, put forth an astounding array of figures, assertations and arguments intended to deny the usefulness and overthrow the practice of vaccination. In vain shall Creighton and Crookshank issue forth writings still-born from the press, while every sound, common-sense practitioner, whose mental vision is not too refined to see what lies plainly before him, quietly continues his unpretentious course of vaccination and re-vaccination.

APPOINTMENT OF SANITARY INSPECTORS AND OFFICIALS.

In last year's report the attention of the Board was called to the exposed condition of the western coast of the State in the following language: The western coast of the State is more exposed than the eastern because of frequent communication with

Digitized by Google

Havana, and having, on account of its many inlets and harbors teeming with fish, greater inducements for visits from Cuban smacks carrying on illegal traffic. Thoroughly appreciating the danger from these unguarded points, the local health authorities of such exposed places were placed on their guard, and inspectors were provided for points not protected.

In order to continue this sanitary supervision of all vessels that may make a harbor on the west coast during the quarantine season, and others which ply regularly between the established ports and West Indian ports, and which were unprovided by the County Boards with proper sanitary inspectors, the State Board deemed the continuance of such inspection and inspectors necessary, and therefore appointed Messrs. G. R. Shultz at Punta Rassa, C. A. St. Armand at Sarasota, Morris Cochran at Boca Grande Pass, Fred Leue for the Manatee river, and Odet Grillion at Port Tampa. Shultz, St. Armand and Leue received a compensation of twenty-five dollars per month, Cochran, by reason of his exposed and isolated position, a salary of sixty dollars per month, and Grillion, a permanent employee, at one thousand dollars a year.

These officials discharged their duties faithfully, and were vigilent at all times. The danger to which these inspectors were subjected at times is well described by a letter from Sanitary Inspector Cochran, at Boca Grande Pass, which is given in the correspondence appended to this report.

Immediately upon the receipt of Mr. Cochran's letter, the President of the State Board of Health, His Excellency Governor Fleming, and the Hon. Thomas Palmer, State's Attorney for the Sixth Judicial Circuit, were communicated with. The attention of the Secretary of the Treasury of the United States, and also of Surgeon-General Hamilton, U. S. M. H. S., was invited to the outrage by a foreign vessel, and report of smuggling made by Sanitary Inspector Cochran.

The name of the vessel was subsequently ascertained, but no arrests have been made; indeed, until very lately, it was not possible to do so, as the Board had no means for prosecuting the indignity and outrage.

Digitized by Google

QUARANTINE STATION AT MULLET KEY.

A prominent feature of the work of the Board during the past year, and a source of much gratification, is the erection of the Quarantine Station at Mullet Key at the entrance to Tampa Bay, on the west coast of the State. The importance of quarantine stations on this coast and at Key West, the extreme southern point of the State, and the urgent demand for them was pointed out to the Board at its organization in 1889, and the work would have been immediately undertaken. but it was thought best to defer erecting for that year these universally recognized important adjuncts and protectors of the public health, in view of the uncertainty that attended the possibility of another immediate visitation of Yellow Fever and the consequent demand which would then have to be made upon the especial appropriation of fifty thousand dollars provided at the special session of the Legislature for such an emergency.

Early in 1890 I again brought the matter to the attention of the Board, and the ways and means for the execution of the work was then considered. It was found, however, upon inquiry at the office of the State Comptroller that the half a-mill tax on the assessable property of the State for the fund of the State Board of Health, as provided by statute, and available in 1890, had not been levied for the year 1889, owing to a ruling and construction of the law by that official, and the Board was confronted with the statement of "No funds;" and although only eleven thousand dollars had been expended of the special appropriation of 1889, the balance of that special appropriation was likewise not available for immediate use. However, some public spirited citizens of the southern portion of the State, recognizing the importance of the contemplated and much to be desired stations, came forward and loaned the Board sufficient money to construct one of the stations proposed—that at Mullet Key. These loans the Board secured by warrants from the Comptroller on future appropriations, which, it was specifically understood between the Board and those advancing the money, were not to be presented to the State Treasury for cancellation until notified that funds existed for that purpose, nor were the warrants to be hypothecated. A small rate of interest was agreed to be paid for a few months for the advance.

Digitized by Google

The contracts for the plant were signed in May by Capt. Thomas White, of Tampa, for the construction of the wharf and approach with superstructure thereon, and by Messrs. Valk & Murdock, of Charleston, for the machinery, and the work was to be finished in ninety working days for the superstructure and twenty-one additional for the machinery. The plant was to consist of a pier-head two hundred feet in length by fifty feet in breadth to which an "L" at one end was to be added. On this pier-head a building was to be erected. Connecting this structure to the shore an approach of fifteen feet in width and the necessary length was also to be constructed. It was provided that the head of the pier, the main wharf, should be in not less than twenty feet of water at low tide, therefore the length of the approach could not at first be definitely contracted for except at a certain sum per foot.

In the "L" portion of the building was to be placed the machinery for disinfection. The specifications for the carpenter and machinist portions of the plant were separately draughted and bids invited for proposals for the work, ample time being given for the bidding. The extracts from the minutes of the Board at the various dates given in the appendix conveys a clear idea of the plan pursued in awarding the contracts.

Owing to the inclemency of the weather the work was frequently interrupted during the summer by squalls and storms, and delays arose from loss of material in transit from Tampa to Mullet Key, and a number of strikes on the part of the workmen who found at times the annoyance and irritation from insects (which were worst last season than in many years) unendurable and they therefore left the work. The whole plant was finally finished as contracted for, and formally accepted by the Board at a special meeting held for that purpose at Mullet Key February 13, 1891.

Besides the buildings mentioned which serve to house the disinfecting machinery, the employes and any cargo which may require disinfection, the station is fitted up with the latest machinery for dry and moist heat disinfecting and sulphur fumigation, and which was constructed by Messrs. Valk & Murdock, of Charleston, S. C. A description of the station is annexed

Mullet Key is located at the entrance to Tampa Bay, at the southwest passage, a channel of the gulf separating it from

Digitized by Google

Egmont Key upon which the "light" is located. It is a military reservation of the United States. An effort was made by Florida's representatives in Congress to secure a donation of this Key from the General Government to the State Board of Health, but an adverse report was made to the request to donate, by the Engineer Department, and instead of the gift a revocable license to use the Key was issued to the State Board of Health by the War Department.

The piling of which the dock is built is of creosoted pine and from the Fernandina works. The piling, before and after creosoting, was inspected by Dr. Horsey, of Fernandina, whose services the Board secured for this purpose and whose discharge of the duties of the trust in this regard was faithfully executed.

It has been the universal sentiment of not only the Superintendent of construction of the work, Mr. W. T. Haskins, but also of the contractors, workmen and others, that the creosoting was as perfectly done as it was possible for the machinery to do it, and Mr. Burchardi is to be congratulated upon the success of this portion of his contract. One hundred and fifty piles were used in the main dock and one hundred palmetto piles in the construction of the approach from the shore. The latter is well braced and the former is perfectly protected from the chafing of vessels by a series of spring fender piles of four each, chained together and placed along the whole front and side. The northern end of the warehouse has been temporarily divided off into nine rooms, 14x15, with a nine foot hall-way, for the present accommodation of the employes connected with the station. I hope that in the near future the Board will be financially able to erect quarters on the island for the employes, besides a suitable hospital at a distant portion of the island for the possible sick.

Some extra work not mentioned in the contracts, and some alterations in the contracts themselves, was found necessary, which have slightly added to the cost of the entire plant.

The cost of the station complete is in round numbers $28,000, viz: for the pier head, buildings and approach, $13,900; for machinery, $7,000; for transportation of machinery from Port Tampa to Mullet Key, $175; for supervision of the work by Mr. Haskins, mechanic, nine months, $825. To this should be added the cost ($5,000) and the subsequent alterations and repairs to

Digitized by Google

the steamer "Missoe" ($886), an adjunct to the station; making the total cost of the construction of the Quarantine Station at Mullet Key, $27,786.00.

Mr. W. T. Haskins, of Tampa, was appointed an agent of the State Board to supervise the construction of the work, which he has faithfully executed, as the following resolution, taken from the minutes of the Board, held February 13th, 1891, gives ample evidence of:

Resolved, That the State Board of Health of Florida and its State Health Officer, desire in this formal manner to convey their thanks to Mr. W. T. Haskins, who during the construction of the Mullet Key Quarantine Station has supervised the same, as an agent of this Board, for the conscientious and faithful manner in which he has discharged the duties of the trust confided to him, and also to express their confidence in his ability and integrity.

Owing to lack of funds, either in the State Treasury or by private proffer, the proposition to build a Station at Key West, similar to the one projected at Mullet Key, was abandoned for the time. It is hoped that this coming summer may find the Board financially able to vigorously prosecute this work and erect this useful adjunct to commerce, at a point where much good can be accomplished, and the benefits will be so apparent.

STEAMER MISSOE.

Fully impressed with the imperative necessity of guarding the coast from the illicit visits of Spanish smacks, which find in the numerous harbors and passes of this section of the State a profitable business in fishing and smuggling, the Board from its inception urged upon the general government, through its proper representative, Surgeon-General Hamilton, of the United States Marine Hospital Service, the necessity for a National Coast Patrol.

Repeatedly since then have efforts been made to secure the assistance of the general government in this most important measure which the State Board urged should be undertaken by it, for the reason that it involved the enforcement of the Revenue laws as well as the protection of the health of the entire country, in preventing smuggling and the consequent introduction of infection, but not until this winter has the recommendation taken the shape of a special mention in any of the appropriation bills of

Digitized by Google

Congress. The failure to obtain relief in this matter of health protection from the general government, and the outrage committed at one of the passes upon an official of the Board in the discharge of his duties, determined the Board that it could no longer delay or defer the question of Coast Patrol, and a steamer of speed, suitably armed, was deemed necessary. This boat kept constantly cruising during the quarantine season would be a menace to all classes of vessels which seek to surreptitiously enter the harbors of the west coast of the State and hold clandestine and illegitimate communication with confederates for the purpose of landing contraband goods liable to infection. The steamer "Missoe," the property of the late T. M. Carnegie, of Dungeness, Cumberland Island, Ga., was offered to the Board at what was considered a remarkably low figure, and after due inspection by the President of the Board and myself, and by a member of the Merrill-Stevens Engineering Company, and other qualified judges of Jacksonville, the boat was bought. The price paid was $5,000, which included not only the hull and machinery, but also two boats, anchors, chains, sails and awnings and some cabin furniture. Some cleaning and alterations had to be made, which will bring the cost up to $5,886. The boat was sold for no defect, but solely as being too small for owner's use, and in the opinion of expert steamboat men, and citizens having knowledge of such matters, was bought at a very great bargain. I do not think a more suitable boat could have been built, certainly not for less than fifteen or twenty thousand dollars, the latter, I am told, being the original cost of the "Missoe."

With a change in the style of boilers from an upright to a horizontal Scotch, the boat would be very fast, and the cost of such changes, with the sale of the present upright boiler would be slight. Attention is invited to the correspondence with the National Health authorities on the subject of Coast Patrol.

Recognizing the assistance that the authority of the general government would afford the State in the suppression of illicit intercourse during the quarantine season between foreign infected ports and the State of Florida, an appointment as special inspector for the grand district of Florida for the captain of the State Quarantine and Patrol boat "Missoe," was asked of the Secretary of the Treasury and promptly granted. Hence, when

Digitized by Google

the quarantine season commences this year the State Board of Health will be better provided than ever before for preventing the introduction of contagious disease from foreign shores.

A Maritime Sanitation Station at Mullet Key, fitted with the improved methods for scientific disinfection, and a patrol boat to guard the avenues of approach, will, it is thought, not only give a sense of security to our own citizens, but renewed confidence to the entire country, in Florida's watchfulness in health matters.

Besides employing this boat for coast sanitary patrol purposes she can be made of efficient service in protecting the fisheries of the State from the piracy practiced by foreign fishermen. A Statute defining this authority will be necessary and should be recommended.

RELATIONS WITH OTHER STATE AND MUNICIPAL BOARDS OF HEALTH.

Official relations with neighboring Boards of Health, of the Atlantic and Gulf coast, have generally been of the most friendly character. The confidence in the integrity of each which rises above listening to rumors and acting on the same, without official confirmation, has also been observed, with one exception. The Boards of Health of Savannah, Charleston, Brunswick and Mobile have been courteous, considerate and generous in the treatment of statements and bulletins proceeding from this office. Dr. Rutherford, the Health Officer of Texas, who constitutes practically the whole Board, also rescinded a prohibitory quarantine on Key West cigars, upon telegraphic request from this office, stating that there was no danger of importing or exporting the bacillus of leprosy in cigars, and that the necessity of such prohibition did not exist. But the State Board of Health of Louisiana has not been generous or just in its dealings with this Board. Without a word of warning, without any intimation to this Board of such contemplated action, the following bulletin was issued on July 28, 1890:

Quarantine Proclamation of the Board of Health of the State of Louisiana:

WHEREAS, it has come to the knowledge of the Board of Health of the State of Louisiana, that for the purpose of avoiding quarantine inspection and detention of themselves, and fumigation and disinfection of their clothing and baggage at the

Digitized by Google

Mississippi River Quarantine Station, passengers from Havana in the Island of Cuba, and from other infected and suspected ports in the West Indies, come from said location to the city of New Orleans, through the seaports of other States, without being subjected to sufficient inspection and detention, or their baggage to proper fumigation and disinfection at said ports;

Now, therefore, by virtue of the powers vested in this Board under Section 4 of Act No. 269 of 1858, of the General Assembly of the State of Louisiana, quarantine is proclaimed against all such persons and their baggage and effects coming into the State of Louisiana. All such persons, together with their baggage and effects, will be arrested on their arrival in the State of Louisiana, and conveyed to the nearest quarantine station, and be there detained for forty days, or less, as the Board may otherwise determine, and their baggage, clothing and other effects subjected to fumigation and disinfection, under the orders of this Board.

IN TESTIMONY WHEREOF I have hereunto affixed my signature as President, under authority of the Board of Health of the State of Louisiana, authenticated with the seal of said Board, at the city of New Orleans, this twenty-eighth day of July, one thousand eight hundred and ninety.

(Signed) S. R. OLLIPHANT, M. D.,
President Board of Health,
State of Louisiana.

And as a sequence a lengthy correspondence ensued. (See correspondence.)

The power to make a sweeping denunciation of this State, and injure her commerce, has never been questioned by this Board, on the part of the Louisiana State Board of Health, but the *right* in the sense of equity and fairness is questioned.

The system of intercourse with Cuban ports during the summer and to which the State Board of Health of Louisiana objected so strongly, was successfully operated during '89 when said Board had official knowledge of the State through an agent. In fact this system, inaugurated in 1885 by the Monroe County Board of Health, has proven a success since its inception. The system bore heavily upon certain classes of vessels and classes of passengers and for this reason, and to overcome this objection, a station fitted with appliances by which no vessel need be excluded from trading with Havana and Florida has been constructed.

There was no yellow fever in Florida during the last twelve months. No person passed the surveillance and inspection *at*

Digitized by Google

our ports and died of yellow fever in any of the cities of Florida or other States. The State Board of Health of Florida has never claimed *perfection* for any quarantine system. There can be no system operated with perfect success for the exclusion of contagious and infectious disease except by absolute non-intercourse, which the State law does not permit; and, happily, the leading sanitarians of this country do not endorse any such barbarous and semi-civilized methods.

For yellow fever, the Board claims that protection is had by a previous attack, and that clothing contained in a confined atmosphere, together with the receptacle, when properly disinfected and aired, conveys no danger. The Board has hitherto insisted, and will continue to require a surveillance at the Cuban port of departure of all passengers and baggage, and upon this inspection, both of departure and arrival, with disinfection of everything that may be considered *fomites*, the Board lays great stress. The Board discards the statements that "it is a question of chance" whether yellow fever is introduced into Florida or not, and in this it stands in marked contrast with the Louisiana Board of Health. I regret the strained relations which have existed between the Louisiana State Board of Health and this Board during the past year, but from the annexed correspondence it can be plainly seen that the cause and affront was offered and not given; and not to dispute the action of that Board would be inconsistent with what is due to the Health Department of this State. Inter state sanitation demands for a successful and protective operation a reciprocity of confidence in official statements, and until proven that such are unattainable, the integrity of the official bulletin should not be questioned, and it is this carrying out the principle of the golden rule that has always actuated the course of this office in dealing with our neighboring States. Watchful and alert, always. Offensively suspicious, never!

OFFICE WORK.

The office work of the Board has steadily increased since the day of its organization. The first year 1,041 letters were received and 1,562 written. During 1890, 1,275 were received and 1,878 written; showing an increase in the correspondence alone of 316 letters.

Digitized by Google

Besides, eighteen circulars of between seventy-five and two hundred copies have been issued, and the endeavor has been to issue monthly bulletins of Vital Statistics since June. Besides this, much work has been done in correcting reports and explaining methods of rendering same. It has been the aim to have every query courteously answered and as promptly as possible, and if any correspondent has failed to receive a respectful answer to any letter sent, it is desired that the failure to receive or the failure to transmit may not be ascribed to any lack of attention on the part of the office.

Record books, complete in all details, have been prepared for the accurate and convenient keeping of Vital Statistics and general sanitary information. The books prepared for the Board are for condensed and consolidated information of the reports rendered by the counties and cities; those for the counties have been supplied with special reference to the needs of the counties.

It is to be regretted that these books could not be furnished without cost to the county and city health organizations, but the depleted condition of the Board's treasury made this donation impossible, and a charge was made of the actual cost, which was almost nominal ($3 each, by reason of the large number printed)

These books are nicely gotten up, requiring many ruled columns. Besides the record books, blanks have been prepared and freely distributed, and every effort has been made to render as easy as possible the making of reports. It was appreciated that this work, often a matter of individual interest in sanitation, was performed without pay, or any compensation, and the aim was to have the duty as little a burden as possible. This large amount of work, covering a diversity of subjects, has been performed with one assistant (Mr. Frank Matthews), to whose application, quickness and system it is a pleasure to testify.

FINANCES.

The Financial Statement of the Board is appended, but it may be as well to explain in detail some matters connected therewith.

The Board has had but one appropriation of funds in two years. The *special session* of the Legislature which created the

Digitized by Google

Board appropriated $50,000 for special work in 1889, and exacted a tax levy for the future support of the Board, of half a mill on the dollar of assessable property of the State. This appropriation of $50,000 has been the sole source from which the Board could draw during the past two years. The levy of the half mill tax, prescribed by statute, was not levied in 1889, owing to a peculiar construction of the law by the Comptroller, and the failure to do so was not discovered by the Board until too late to have it rectified. The same omission would have occurred in 1890, for it was by the merest chance that the executive officers of the Board discovered that no levy had been proposed, and protested against the construction of the law as made by the Comptroller, as the Board would thereby not only find itself without funds to carry on the routine work of the office but its credit in the matter of contracts made for future work would be impaired. It should be borne in mind that the total expenses of the Board have been defrayed for two years out of a special appropriation made specifically for one year, and that the purchase of much valuable property in plants of different kinds are included in the total expenditures.

The protection from the invasion of disease from without has been increased, not to mention the increased respect earned for the State from neighboring States, in this particular, of which Floridians may be justly proud.

The fund provided by the Legislature for the support of the Health Board (viz.: half mill tax) should defray all expenses for health purposes in the State, unless an emergency arises, as in case of an epidemic. Provision for emergencies like this should be made and authority granted to the Governor to borrow necessary funds, if there should not be a sufficiency unappropriated in the State Treasury. No special tax levy should be required of counties for sanitary inspections and collection of vital statistics, for it is estimated that if the levy provided for the State Board of Health fund is regularly made and collected, there will be ample means for all purposes. The larger cities, where population is dense, having under their charters departments of health, could and should carry on their health work and protection without calling on the State Board for funds, except in emergencies, and it is thought that the public and

Digitized by Google

independent spirit which is generally found in such communities will prompt their city governments to take laudable pride in caring for the sanitary welfare, as well as the collection of vital statistics; leaving to the State Board to defray all expenses for the general protection of the State.

SANITARY IMPROVEMENTS.

It is gratifying to note that much interest has been awakened during the past year in sanitary matters throughout the State. The towns have been alive to the importance of cleanliness and stated inspections of premises have been ordered. Officials have been provided for the purpose of enforcing attention to these matters in places where apathy and indifference formerly existed.

Escambia county, ever watchful of its health and commercial interests, having ample means, has, through its efficient Board of Health, erected during the year a disinfecting plant at the quarantine station at the port of Pensacola, which is fitted with all the modern scientific improvements for moist and dry heat disinfection and sulphur fumigation.

Engle cremation furnaces have been erected in Jacksonville, St. Augustine and Tampa, and grading, paving and draining of streets is in progress at Tampa and Key West. In the latter place two public buildings have been erected, one by the United States Government and one by the county of Monroe; and the third is in course of construction by the municipality. In Tampa the municipality has erected a city hall, and a County court house has been contracted for.

The construction of a cremation furnace, abattoir and the perfection of a system for odorless excavating the cess pools and privy vaults on the Island of Key West is recommended. (See reports annexed.)

It will be a satisfaction to chronicle in the next annual report the completion of all these much-needed sanitary improvements. Green Cove Springs and Palatka are to be commended for their increased efforts towards cleanliness, and thereby rendering these cities attractive.

In July of last year the Clerk of Key West addressed a communication to the State Health officer in relation to sewerage

Digitized by Google

disposal, which, with the answer, will be found included in the appended correspondence.

As stated in a former report, the question of what system of underground drainage and sewerage, if any, should be adopted for Key West, had been fully discussed in public meetings, through the press, and the sentiment of individual citizens of the community, last May when the first annual report was submitted, was so divided, that at one time it seemed as if an unanimity of opinion of even the Commissioners would not soon be had. It is learned that, although the consideration of a system for underground drainage and sewerage for Key West has been temporarily suspended, yet the idea has not been abandoned.

ANNUAL INSPECTIONS.

Section 12 of the Act creating a State Board of Health specifies an annual inspection by the State Health officer of all towns and railroad crossings between November and May of each year.

During the winter of 1889 and '90 I found it impossible to comply with this requirement owing to unavoidable detention on other and more important health matters in the lower portion of the State. The President of the Board pointed out in his report the necessary failure to comply with the law, and gave it as his opinion that, under the most favorable conditions, it would be impossible for the State Health officer, without calling on his Assistant, to literally comply with the specific details of this Section in this respect. When the period for these inspections arrived this year the finances of the State Board did not seem to justify the expense which a literal compliance with the requirements would entail. There was no desire to disregard or evade a full obedience to the law, but having had repeatedly timely warnings from the Treasury Department of the State respecting the scarcity of funds, and aware of the uncertain state of the Board of Health's special fund, the construction of this section, in view of the facts above recited, was submitted to the Governor and the President of the State Board of Health for action thereon. (See correspondence.)

The opinions of both officials, as understood by the State Health Officer, not deeming a literal compliance

Digitized by Google

with Section 12 as necessary, only the special inspections indicated by the President were made. I agree with the President in the statement made by him last year, that it will be a matter of physical impossibility for one individual to inspect, between the dates named, all the towns and railroad crossings in the State. Nor is it necessary that such inspections should be yearly made. The larger towns where the population is dense might with propriety be yearly inspected, and recommendations made for improving the sanitary condition and removing nuisances objectionable to good health, for "we never see ourselves as others see us;" but even these inspections had better not be specifically a legislative ordinance, for all inspections may be left to the judgment of the Board, the President, or the Health Officer. This report dwells upon this matter because it seems best to explain to the city and town authorities and individual citizens of the same, which have complained of the Health Officer not visiting them, that the failure to do so has not been form want of desire or from apathy or indifference to their importance, but entirely to lack of funds. As already explained in another portion of this report, the failure to levy the tax in 1889, provided for by the Act creating the State Board, has very seriously embarrassed the operations of the Board in consummating many plans which had been devised for improving the health of the State. Had the State Health Officer been possessed of the funds it would have given him more pleasure than he can now well express to have paid visits to every town in the State, and conversed with the health authorities of the same on matters for improving their sanitary condition or giving such advice as might be sought.

The attention of the Board is invited to the inclosed reports on the Convict system of the State, the State Insane Asylum and the sanitary condition of the State Capitol, and the attention of the Legislature should be invited to these matters

LEGISLATION.

President Daniel having requested suggestions as to what might be advised as amendments to the present laws designed to increase the efficiency of the Board for the better health protection of the State, the following is respectfully submitted:

FIRST—The State Board of Health should be incorporated, in order that as a body it may acquire and dispose of property.

Digitized by Google

SECOND—The State Health Officer, who is the Secretary and Executive Officer of the Board, should be a member of the State Board of Health and an appointee of the Governor. This would increase his efficiency, and is in keeping with the usages of other State Boards of Health.

THIRD—The duties of the State Health Officer should be more clearly defined than in the present law, which deals more with the existence of epidemic disease, and only defines the duties of the State Health Officer at such times, but does not define his authority to enforce cleanliness and sanitary laws in towns for the prevention of disease.

FOURTH—There should be some enactment for the collection of vital statistics; and the State Health Officer should be by law Registrar of Vital Statistics for the State. Authority should be given to the Governor to appoint, upon the recommendation of the State Board of Health, a health officer for each county whose services should be paid for from the funds of the State Board of Health. He should collect the Vital Statistics of the County; the births, marriages and deaths, and forward them monthly to the office of the State Board of Health, and professionally attend, without charge, the county poor and the inmates of the county hospital and county jail.

FIFTH—As this Board has an efficient coast patrol boat, for quarantine and maritime sanitary protection of the coast of Florida, the status of this patrol and the Health Officer in connection therewith, should be clearly defined by law, and as far as possible protect the salt water fish industry of the State from foreign encroachment. The State Health Officer should be empowered to make arrests, not only for violation of the quarantine laws of the State, but also to prevent infringement upon the rights of Florida fishermen and fisheries. Authority of a sheriff should be given the State Health Officer, else it will be impossible to make the quarantine laws effectual.

SIXTH—The efficiency of the Board will be increased by adding the Governor of the State thereto, as an ex-officio member, which would make the Board consist of five members. As it has been the custom of the past two years to consult the Governor on all important matters, it would seem that as a member of the Board the Governor of the State would be a valuable aid to the health interests of the people.

Digitized by Google

SEVENTH—An enactment by the Legislature making the President and State Health Officer, as Secretary of the Board, an executive committee with plenary powers to act ad interim of the regular meetings of the Board, would also increase the efficiency of the health administration in the State, economizing funds by avoiding the necessity for a meeting of all the members to take cognizance of matters of minor detail.

EIGHTH—Section 12 of the Act creating the State Board of Health prescribes the inspection by the State Health Officer of all cities, towns and railroad crossings in the State between the first of November and the first of May of each year. This is impossible of execution, and hardly necessary in a sanitary or hygienic point of view; and adds a large expense for traveling. This section could be amended to require inspections discretionary in the judgment of the President of the Board and the State Health Officer, or the Board when in session.

Certain modifications of the regulations of the Board may be made without destroying their efficiency, for instance as the Board has the advantage and use of two stations on the West coast, besides the National Station at Dry Tortugas, where improved disinfection is practiced, certain regular lines of steamships could be relieved of the restrictions due to laying over night in the harbor of Havana during the quarantine season, provided a call is made at one of these quarantine stations before communicating with any port or harbor in the State. The fees exacted for the inspection of vessels having no sickness on board, while plying between the ports of the State, should be abolished, as there is no justice in exacting fees for inspections of vessels from healthy places with healthy crews and passengers, for the Board alone has the power to declare inter-place or port quarantines, and prescribe the necessary detention. Protection is afforded through the careful watchfulness given by the Board to all such matters, and the people are timely warned of danger.

Restriction on commerce should be as light as is compatible with health protection. Commerce should be invited and encouraged to our ports, and not driven away by the exaction of exorbitant fees and unnecessary detention.

Digitized by Google

The policy of the Board should be to protect the public health first; secondly, in so doing not to needlessly hamper or interfere with the commercial and business interests of the State. But each should harmonize, as much as possible, one with the other.

CONCLUSION.

The increased prosperity enjoyed by the State during the past two years, commencing immediately after the wide spread epidemic and general demoralization of all business, and almost every interest in 1888, has been largely due to the confidence inspired abroad by the creation of a State Board of Health, and the watchful activity displayed by it in all matters pertaining to the general health. The sum annually appropriated to this purpose, through taxation, is probably returned to the State Treasury many times in the investments made by parties residing in other parts of the Union, interested in the State, but who would refrain from placing money therein if the old regime of yearly scares, panics and interference with individual liberty, by interplace and inter county quarantines existed.

In concluding this report my thanks are tendered to the Board for its courteous consideration of all suggestions from the State Health Officer, and to the President of the Board and Governor of the State for their *always* generous and hearty support of all recommendations for protecting and preserving the public health.

JOSEPH Y. PORTER, M. D.,
STATE HEALTH OFFICER.

Digitized by Google

STATEMENT OF FINANCES.

The State Board of Health in account with the State Treasurer of Florida.—April, 1889, to April 30, 1891, March and April, 1891, approximated.

1889.	DR.		
To amount appropriated by Legislature of State of Florida, special session, Feb., 1889.			$50,000.00
To disinfection fees at Port Tampa			201.50
			$50,201.50
	CR.		
By disbursements State Board of Health for year ending May 1, 1890.....	$11,405 25		$11,405.25
Balance on hand May 1, 1890.....			$38,796.25
1890.	DR.		
To balance on hand May 1, 1890, over unexpended balance of appropriation of special session of 1889.....			$38,796.25
To disinfection fees at Port Tampa.....			69.25
To receipts from sale of record books.....			80.00
			$38,9455.0
	CR.		
By disbursements, viz.:			
Per diem and mileage expenses of members..	282.80		
State Health Officer's traveling expenses.....	608.20		
State Health Officer's salary.....	2,250.00		
Clerical assistant in office of Board.....	777.50		
Attorney's salary and extra legal expenses....	256.85		
Inspectors salaries.....	4,427.90		
Office rent.....	245.00		
Office furniture.....	77.77		
General office expenses, postage, etc., including janitor's salary.....	245.17		
Printing and stationery.....	573.50		
Printing annual report for year 1889.....	120.00		
Official telegrams.....	70.59		
Packing camp equipage.....	11.15		
Expenses Dr. C. J. Burroughs' trip to St. Augustine (case Edgar L. Warren).....	18.70		
Steamer hire for coast inspections.....	185.00		
Repairs to "Missoe".....	886.01		
Maintaining steamer "Missoe".....	1,506.64		
Erecting Quarantine Station at Mullet Key ...	21,218.77		
Maintaining Quarantine Station to date.....	34.00		
Salary Supervisor of Construction, 8 months..	825.00		
Total amount (approximately) of disbursements that will be made during March and April, 1891; carrying this statement to beginning of May, 1891.....	3,249.16		
	$37,869.71		$37,869.71
Balance on hand of appropriation of 1889..			$ 1,075.79

NOTE.—Money to pay for the Missoe has not yet been drawn from the State Treasury, and the purchase is not included in this statement.

Digitized by Google

TABLE OF DEATHS CLASSIFIED BY DISEASES AND COUNTIES FOR THE SIX MONTHS ENDING DECEMBER 31, 1890.

DISEASES.	Alachua.	Bradford.	Clay.	Dade.	DeSoto.	Duval.	Escambia.	Franklin.	Hillsborough.	Jefferson.	Lake.	Levy.	Leon.	Manatee.	Marion.	Monroe.	Nassau.	Orange.	Osceola.	Polk.	Putnam.	Santa Rosa.	St. Johns	Taylor.	Volusia.	Wakulla.	Jacksonville, (city of).	Pensacola, (city of).	Total.
Abcess, (not stated)	..	..	..	..	1	..	..	..	..	..	..	..	..	..	1	1	1	1	1	..	..	..	..	..	..	..	1	....	7
Abscess of Liver	..	..	..	1	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	....	....	2
Abortion	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..	....	....	1
Accident	..	..	..	..	2	..	..	2	1	..	1	..	..	..	2	....	..	..	1	..	1	..	..	..	..	..	2	....	12
Angina Pectoris	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..	....	1	2
Anæmia	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	....	..	..	..	..	..	..	..	..	..	..	....	2	2
Apoplexy	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	3	..	..	..	..	..	..	3	..	..	..	5	2	14
Asphyxia	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	....	..	..	..	..	..	..	1	..	..	..	....	1	2
Bowels, Congestion of	..	..	..	..	..	1	..	..	..	..	..	..	1	..	2	....	1	1	..	..	..	..	1	..	..	..	....	1	8
Bright's Disease	..	..	..	..	..	..	..	..	1	..	..	..	..	..	1	2	..	..	..	1	..	..	1	..	..	..	6	....	12
Bronchitis	..	..	..	..	..	..	..	..	2	..	..	..	..	..	..	8	..	..	..	..	..	..	1	..	..	..	4	....	15
Cancer (not stated)	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	3	..	..	..	..	..	..	..	..	..	..	1	....	5
Cancer (Womb)	1	..	..	..	..	..	..	..	..	..	..	..	..	..	1	....	..	..	..	..	..	..	..	..	..	..	1	....	3
Cerebral Congestion	1	..	..	..	..	..	..	2	..	1	..	..	1	..	1	1	..	..	..	..	4	..	..	..	1	..	....	....	12
Cerebral Softening	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	....	1	..	..	..	..	..	..	..	..	..	1	2	4
Childbirth	..	..	..	..	..	1	..	..	..	..	..	..	..	..	3	....	..	..	..	1	..	..	..	..	..	..	....	....	5
Cholera Infantum	..	1	1	..	..	..	..	..	1	1	..	..	..	..	1	8	4	..	..	1	..	..	..	..	..	..	7	2	27
Cholera Morbus	..	..	..	..	..	..	..	2	..	..	..	..	..	..	..	....	..	..	..	..	..	..	..	..	..	..	1	....	3
Colic	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	....	..	..	..	..	..	..	..	..	..	..	1	1	2
Congestive Chill	..	..	..	..	..	..	..	..	..	..	2	..	..	..	1	....	..	..	..	..	1	..	..	..	..	..	....	....	4
Consumption	7	..	..	..	1	3	3	..	8	..	3	..	..	..	14	4	4	5	1	..	..	..	..	..	4	4	32	23	116
Convulsions	1	..	..	..	1	2	1	..	1	..	..	..	..	..	2	9	9	1	..	..	1	..	..	..	..	..	13	....	41
Croup	..	..	..	..	..	1	1	..	..	..	..	..	..	..	..	....	..	..	..	..	1	..	..	..	..	..	....	1	4
Cyanosis	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	....	..	..	..	..	2	..	..	..	..	..	....	....	3
Cystitis	..	..	..	..	..	..	..	..	2	..	..	..	..	..	2	....	..	..	..	..	..	..	..	..	..	..	....	....	4
Dentition	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	....	..	..	..	..	..	..	..	..	..	..	6	5	12
Diarrhœa	..	..	..	..	1	1	1	2	6	1	1	..	..	..	6	4	2	4	..	..	2	..	1	..	3	..	13	7	50
Diphtheria	..	..	..	..	..	..	..	..	..	..	1	..	..	..	..	....	..	..	..	..	..	..	..	..	..	..	....	1	2
Dropsy	1	1	..	..	..	1	1	1	1	..	..	..	..	..	1	2	1	..	..	..	..	..	..	1	..	..	5	2	18
Drowned	3	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	3	..	..	..	..	..	..	..	..	1	1	9
Enteritis	1	..	..	..	..	1	1	..	1	..	..	..	..	..	..	6	1	..	..	..	..	..	..	..	..	..	9	1	21
Epilepsy	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..	1	....	2
Empyema	..	..	..	..	..	..	..	..	..	..	..	1	..	..	..	....	..	..	..	..	..	..	..	..	..	..	....	....	1
Fever, (Catarrhal)	1	..	..	..	..	..	..	..	..	..	..	..	..	..	1	....	..	..	1	..	..	..	..	..	..	..	2	....	5
Fever, (Dengue)	..	..	..	..	..	..	..	..	..	..	..	..	1	..	..	....	..	..	..	..	..	..	..	..	..	..	....	....	1
Fever, (Malarial)	4	..	..	2	6	..	1	4	..	..	2	2	3	12	14	4	1	..	..	9	..	1	..	2	..	23	11	101
Fever, (Typhoid)	5	..	..	1	1	2	1	5	1	..	..	..	..	2	..	1	1	..	..	3	..	1	..	1	..	7	17	48
Gangrene	..	..	..	..	..	..	..	..	..	..	..	..	..	..	4	....	..	..	..	..	..	..	..	..	..	..	....	1	5
Gastritis	1	..	..	..	..	..	..	..	3	..	..	..	..	..	..	....	..	..	..	..	..	..	..	..	..	..	....	3	7
Gastro Enteritis	..	..	..	..	..	..	..	..	..	..	..	2	..	..	1	....	..	..	..	..	..	..	..	..	..	..	....	....	3
Gunshot wounds	1	..	..	..	3	1	..	..	1	..	..	..	..	..	1	....	..	..	..	..	1	..	..	..	1	..	....	2	10
Haematocele	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	....	..	..	..	..	..	..	..	..	..	..	....	....	1
Heart Disease (?)	4	..	..	..	..	1	1	1	2	..	..	1	1	..	4	13	2	3	..	..	2	..	3	..	3	..	13	3	57
Hives	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..	....	..	..	..	..	..	..	1	..	..	..	1	....	3
Homicide	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	....	..	..	..	..	1	..	1	..	..	..	1	....	3
Hydrothorax	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	....	..	..	..	..	..	..	..	..	..	..	1	....	1
Jaundice	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	....	..	..	1	..	1	..	2	..	..	..	2	1	7
Kidney, (Inflam. of)	..	..	..	..	..	..	..	..	1	..	..	..	..	..	..	....	..	..	..	..	..	1	..	..	1	..	....	....	3
Laryngitis	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	....	..	..	..	..	..	..	..	..	..	..	3	1	4
La Grippe	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	....	..	..	..	..	..	..	..	..	..	..	....	....	1
Liver, Congestion of	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	....	1	..	..	..	..	..	..	..	..	..	....	....	1
Liver, Cirrhosis of	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..	2	1	..	..	..	..	..	..	..	..	..	....	....	4
Lungs, Congestion of	1	..	..	..	..	1	..	..	..	..	..	..	..	..	1	....	..	1	1	..	1	..	1	..	1	..	2	....	10
Marasmus	..	..	..	..	1	..	..	..	1	..	..	..	..	..	..	13	1	..	..	..	..	..	3	..	..	..	21	1	41
Malarial Cachexia	..	..	..	..	..	..	..	..	1	..	..	..	..	..	..	....	..	..	..	..	..	..	..	..	..	..	....	....	1
Measles	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	....	..	..	..	..	..	..	..	..	..	..	....	1	1
Meningitis	..	..	..	..	..	..	..	..	2	1	..	..	..	..	..	7	1	1	..	..	1	..	..	..	..	..	3	1	17
Myelitis	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	....	..	..	..	..	..	..	..	..	..	..	2	....	3

Digitized by Google

DISEASES.	Alachua.	Bradford.	Clay.	Dade.	DeSoto.	Duval	Escambia.	Franklin.	Hillsborough.	Jefferson.	Lake.	Levy.	Leon.	Manatee.	Marion.	Monroe.	Nassau.	Orange.	Osceola.	Polk.	Putnam.	Santa Rosa.	St. Johns.	Taylor.	Volusia.	Wakulla.	Jacksonville, (city of).	Pensacola, (city of).	Total.
Oedema of Larnyx	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	....	1	1
Osteosarcoma	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..	....	....	1
Paralysis	..	..	..	..	..	..	1	..	..	..	..	1	..	..	..	1	..	..	..	..	1	1	..	..	..	..	3	1	9
Peritonitis	..	1	..	..	..	..	..	..	..	1	..	..	..	..	..	..	2	1	..	..	..	..	..	..	2	..	....	1	8
Pericarditis	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	....	2
Pertussis	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	2	1	4
Pleurisy	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	....	....	1
Pneumonia	8	..	..	..	2	3	3	..	1	..	..	..	..	..	2	1	..	..	..	..	..	3	..	3	2	1	3	3	35
Poisoned, (not stated)	1	..	..	..	..	..	..	1	1	..	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..	....	....	4
Poisoned, (opium)	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	....	1
Progressive Ataxia	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..	....	....	1
Puerperal Hemorrhage	..	..	..	..	..	..	..	..	1	..	..	..	..	..	..	2	..	..	..	..	..	..	..	..	..	..	....	....	3
Premature Birth	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..	2	....	3
Rachitis	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..	....	....	1
Rheumatism	..	..	..	..	..	..	1	1	..	..	..	..	..	..	..	....	..	..	..	..	..	..	..	..	..	1	1	....	4
Rupture of Uterus	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	....	..	..	..	..	..	..	..	..	1	..	....	....	1
Rupture of Bladder	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	....	..	..	..	..	..	..	..	..	..	..	2	....	2
Senile Decay	5	..	1	2	..	1	2	..	3	..	2	..	..	2	4	8	..	..	..	..	3	..	..	..	2	1	6	1	43
Septicæmia	1	..	..	..	..	..	..	..	..	..	..	..	..	..	1	2	..	..	..	..	..	..	..	..	..	..	4	....	8
Still Birth	5	..	..	..	1	..	..	..	..	..	..	1	1	..	3	....	..	..	..	..	11	..	4	..	..	..	7	....	33
Stricture of Œsophagus	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	....	..	..	..	..	..	..	..	..	..	..	1	....	1
Suicide	..	..	..	..	..	..	1	..	..	..	..	..	..	..	..	....	..	..	..	..	1	..	..	..	..	..	....	1	3
Sunstroke	..	..	..	..	..	..	1	..	..	..	..	..	..	..	..	....	..	..	..	..	..	..	..	..	..	..	....	....	1
Syphilis	..	..	..	..	..	..	..	..	..	..	..	..	2	..	1	1	..	..	..	..	..	..	..	..	..	..	....	1	5
Tetanus	1	..	..	..	..	..	..	..	..	..	..	..	..	..	2	7	..	..	..	..	..	..	4	..	..	..	3	4	21
Tonsilitis	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	2	..	..	..	..	..	..	..	..	..	..	1	....	3
Tumor, (not stated)	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..	1	1	3
Uræmia	..	..	..	..	1	..	..	..	..	..	1	..	..	..	..	....	..	..	..	..	..	..	..	..	..	..	....	....	2
Uterine Hemorrhage	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	....	..	..	..	..	..	..	..	..	..	..	1	....	1
Cause not given	5	..	..	3	5	6	2	..	7	..	1	..	1	..	3	....	6	..	..	..	8	1	3	4	..	..	6	2	63
Total.	61	3	2	6	24	31	23	14	57	6	12	8	10	5	81	137	44	23	6	3	58	3	35	7	25	5	236	112	1037

It is to be regretted that the reports were furnished with such diverse nomenclature, and it is for this reason that no classification has been made; indeed, it was impossible to do so, therefore an alphabetical table has been substituted.

It will be seen from this table that of the preventable diseases Malarial Fever (and under this heading I have included the terms "Continued" "Protracted" and "Pernicious" Fevers) has been the cause of death in Escambia (11), Monroe (14), Duval (29), Hillsborough (4), Alachua (4), Marion (12) and Putnam (9) counties.

Diarrhœa has been the cause of death in the counties of Duval (14), Escambia (9), Marion (6), and Hillsborough (6).

Diphtheria has been the cause of death in the counties of Escambia (1), and Lake (1).,

Cholera Infantum has been fatal in Duval (8), Nassau (4), Escambia (7), and Monroe (8) counties.

Consumption has been the cause of death in the counties of Duval (35), Escambia (26), Marion (14), Hillsborough (8), Alachua (7) and Orange (5).

Measles has caused death in Escambia (1).

Digitized by Google

INSPECTION OF KEY WEST.

JACKSONVILLE, FLA., March 15, 1894.

To Dr. R. P. Daniel, President State Board of Health, Jacksonville, Fla.:

DOCTOR—Complying with your instructions to visit the city of Key West and inspect the sanitary condition thereof, the following is submitted: In the first annual report to the State Board of Health it was noted that extensive improvements were contemplated for Key West, and that a system of sewerage and underground drainage was one of the sanitary possibilities, although the discussion as to the selection of a system seriously threatened to delay early action thereon.

I regret to record that no system for even the area of the island that could be underdrained has as yet been adopted, although it is understood, I am pleased to say, it has not been definitely determined that no partial system will be adopted.

In a communication to the City Commissioners, dated August 12th, 1890, which is appended hereto, I gave it as my opinion that no general and uniform system could be adopted for the whole Island which would meet all sanitary demands. My opinion was formed mainly from that of Col. Waring when on a visit here that, on account of the topography of the Island, two systems for the disposal of household wastes would probably be found necessary for Key West. It seems to me a mistake to abandon entirely the underdrainage of Key West because a system for this purpose is not practicable for the whole, and it is to be hoped that, before it is too late, the City Commissioners may again consider the subject. It is the practice in other places to underdrain portions of cities where it can be safely done, leaving other methods to care for the house wastes of those portions where the first named system cannot be applied.

Various improvements in Key West have been commenced during the past year and are being pushed. Contracts for the grading and paving of many miles of streets have been let, and the laying of comfortable sidewalks, by owners of abutting prop-

Digitized by Google

erty is required by ordinance. Streets formerly running through low places and stagnant pools of water have been filled in by the clean earth from excavations for grading, and have been so extended as to be a source of convenience to the public and enhance the value of real estate in the immediate neighborhood. An ordinance compelling owners of low lots to fill them to the prescribed street grade is needed and will, I have no doubt, be passed as soon as all the levels and grades have been established.

The County Commissioners have erected a neat and substantial brick court house and contemplate a new jail at an early date.

The City Commissioners have a city hall with a market house central fire station and city prison in course of construction, to be built of brick and iron.

The attention of the municipality has been, at various times, and again recently, called to the necessity for a cremating furnace and a general slaughter house. The cremating furnace is especially demanded to consume an immense amount of garbage and trash, the daily outputs of manufactories and private premises, which accumulates in a surprising manner. At present this debris is used partly for making land in the upper portion of the city and in part is deposited at the dumping ground (in violation of the Rules and Regulations of the State Board of Health), and an attempt is made to destroy it by burning in the open air. This latter method is only partly done and very imperectly effects cremation, a charring of the upper portion being all that is accomplished. A recent communication from the municipality in reply to an urgent appeal for a better system of garbage disposal and vault cleaning, promises speedy compliance with suggestions in this regard. It is to be hoped that the day is not far distant when dirty premises, foul smelling vaults and unhealthy disposal of garbage will be replaced by neat and tidy private yards, underdrainage (if only in part of the city) and a cremating furnace. A general slaughter house where beef can be inspected on the hoof before butchering would also prove beneficial to the health of the community in preventing the killing for food of sickly or emaciated animals, besides satisfying the general public in regard to the condition of the meat offered for sale.

Digitized by Google

The commercial importance of Key West demands the erection in the harbor, at an early date, of an inspection and disinfection station of improved pattern, to be used not for infected vessels, for the United States Government has provided the Dry Tortugas Station for that class, but for vessels healthy in passengers and crew, though coming from suspicious ports, to remain a sufficient time to have the foul air removed from the holds and bilges, and to disinfect any baggage or cargo likely to carry infection.

A station of this description would relieve much of the restriction now in force against Havana traffic with Key West, and at the same time, with the surveillance over travel as now exercised, make this traffic perfectly safe to the city, State and country at large.

Very truly yours,

JOSEPH Y. PORTER,
State Health Officer.

INSPECTION OF TAMPA.

To the President of the State Board of Health, Jacksonville, Fla.:

SIR—Tampa being one of the points mentioned by you for inspection this year, the following is respectively submitted:

More attention and time has been devoted to the western sea coast of the State, and to those places having frequent communication with Cuban ports, than to interior localities, as it was thought that cleanliness and a good sanitary condition would largely enter into the health protection of those places, and through them to the State at large.

It is a pleasure to state that during the past year much has been accomplished in Tampa for the public health. The late Executive of the city was a man of great intelligence and thoroughly appreciative of the benefits of good hygiene and public sanitation. His frequent inspections, his warnings and punishments to offenders against sanitary ordinances had an effect to abate many nuisances, and to correct apathy and indifference to appearances by property owners.

With the exception of the epidemic of Dengue in the summer and of Catarrhal Influenza in the fall, the citizens of Tampa have

Digitized by Google

enjoyed very good health; and it cannot be said that the two mentioned diseases were confined especially to Tampa or the coast; for the prevalence throughout the State was general. The mortality from all causes at Tampa has been exceedingly low. In the matter of sanitary improvements much has been accomplished. A stone culvert to carry off storm water has been substituted for an unsightly and unhealthy ditch on Jackson street, and the street has been filled in and levelled to a grade. The river front facing the depot of the South Florida railroad has been bulkheaded with piling and the marsh filled in with clean sand. It is understood that an ordinance now compels all property owners to bulkhead and fill in along the whole river front. Much valuable land will in this way be reclaimed besides adding greatly to the appearance of the river front. About two miles of street grading has been made and paving laid, and it is understood that the subject of under-drainage and sewerage will demand the early attention of the Municipal Council. An Engle cremating furnace has been erected, which efficiently and effectually disposes of the garbage, night soil and all trash. A steam cleaning apparatus for the pails is an important attachment of this furnace.

Besides these sanitary improvements, it is briefly noted, the completion of the large and magnificently furnished hotel in West Tampa, and the lately contracted for court house of elegant design and appointments. It will thus be seen that a laudable pride is taken by the citizens of Tampa in the advancement and prosperity of their town, and that improvements of sanitary importance demand equal interest, and a large share of the attention of the citizens generally.

Very truly yours,

JOSEPH Y. PORTER,
State Health Officer.

Digitized by Google

DESCRIPTION OF MULLET KEY QUARANTINE STATION.

The Mullet Key Quarantine Station is situated on the south side of Mullet Key at the south west passage to Tampa Bay, a channel of the Gulf separating it from Egmont Key upon which the "light" is located.

The building is erected on piles about 700 feet from the shore. The piles, 155 in number, were brought from Fernandina, and have had forced into them 16 pounds of creosote to the squaree foot, making it the best piling ever driven. These immense piles are driven from 17 to 22 feet into an extremely sticky marl bottom, almost unyielding. They stand in 22 feet of water and project 8 feet above the surface of the bay.

The house has a frontage of 207 feet, is built like a letter L, the dimensions being 37x200 feet in the main wing, with an L 37x90 feet, 12 feet 6 inches in height from the floor to rafters. It is well lighted and ventilated, having three large sliding doors opening on the frontage, which is eight feet wide, and numerous windows in other portions of the house. Temporary quarters are prepared in the east end for the officials and their help who will need to abide there. There are nine rooms 14x15 feet, four on one side and five on the other of a 9 foot hallway. The remainder of the main wing is allowed for the manipulation of baggage and ship's furnishing which must undergo fumigation. The L is devoted to the machinery of the station. The house is painted in a deep yellow, trimmed with red. The roof, a most excellent one, is made of cypress shingles, 4½ inches to the weather, which are protected by two coats of metallic paint. About 135 pounds of paint were necessary for the roof, and the house and approach contain about 200,000 feet of lumber.

The fumigating apparatus consists of a sheet iron furnace shell ⅛ inch thick, 10 feet long by 4 feet 6 inches high and 3 feet broad, which is built in wagon-top shape. The furnace is lined with brickwork which supports the grate bars. The two castiron fronts have doors opening into the ash pit, the grate bars and the sulphur pans. These pans, two in number, are each half the length of the furnace and rest on racks above the fires, separating the furnace into two parts. Underneath the pans the smoke of the fire passes out through a pipe connecting with a smoke stack. When the pans are sufficiently heated by the fire below to ignite the sulphur, the fire is drawn out of the grates on to the concrete hearth in front and then raked into the ash pits. Sticks of pure brimstone are then thrown in and it ignite immediately. The blower is then started.

Digitized by Google

Beside the furnace stands an upright cylinder 30 inches in diameter and 4½ feet high. From the center of the furnace a 10 inch pipe extends in an arch above, reaching over to the top of the cylinder, where it connects with a pipe which runs down the cylinder to within six inches of the bottom. Another pipe leads out from the cylinder to a Sturtevant horizontal exhaust fan No 4, which in turn is connected with a 12 inch galvanized iron pipe that leads out of the house on the wharf, where it branches and is arranged to accommodate two vessels. Just beyond the fork of the pipe a damper is arranged in each section so that no fumes need be wasted when but one pipe is needed. The ends of the pipe are extended by a 12 inch asbestos hose about 12 feet long, to which a wire gauze basket is attached. By the use of this the sulphurous fumes are distributed evenly and as desired through the hold of the vessel. The exhaust fan is connected by a belt with a seven horse power engine. When set in operation the fan causes a vacuum in the upright cylinder, drawing the sulphur fumes out of the furnace into the cylinder, then through the exhaust fan which blows it into the great pipe leading to the vessels. This is an improvement on the first machine in Charleston, where the fumes were blown through the furnace instead of being drawn out, and it has proved to be a safeguard against fire. The Charleston furnace was experimented on and improved, and this furnace is a copy of the one now used at Charleston. Every part of the machine is simple, easily understood and perfect in its workings. Goods and baggage not treated in the steaming cylinder will be exposed in the ship's hold and subjected to the sulphur fumes.

In the northwest corner of the L stands a large cylinder which is 37 feet long and 8 feet in diameter. The straight portion of this cylinder is 30 feet long. It is made of best boiler steel one-fourth inch thick, firmly riveted together, and the straight portion is first covered with hair felting an inch thick, held in place by wire netting and covered over all with a tight painted canvas. This cylinder is connected with a 35-horse power boiler standing a few feet away, which supplies the dry and moist heat necessary for the disinfecting process. Cast-iron manifolds run along the bottom of the inside of the steaming cylinder. The steam passes from the boiler by means of a two and a half inch pipe into a T which fastens into two manifolds. There are three manifolds on each side of the T, extending to the ends of the cylinder. The steam passes from the pipe into two holes which run the whole length of the manifolds, and from this the steam is discharged into sixty-six coiled iron pipes. Passing through these pipes, which just fit into the cylinder, the steam comes back again into the manifolds and passes

Digitized by Google

out through two pipes which are screwed into the end of the manifold, and run down to the center of the cylinder, where it escapes through another pipe regulated by a valve underneath the cylinder. Another pipe through which the moist steam escapes runs along the bottom of the cylinder. This pipe is one inch in diameter and perforated by three sixteenth inch holes every four inches and connecting in the center of the cylinder with an inch and a quarter pipe leading to the boiler

The boiler has two means of water supply, a Park injector and a steam pump, which are connected with either the salt water of the bay or the great fresh water tank which has a capacity of 15,000 gallons. Another tank on the roof holding 5,000 gallons of water is used in washing out the hold of vessels with a solution of muriate of ammonia and bi-chloride of mercury, when necessary, and for other purposes.

The front end of the cylinder is fitted with a cast-iron ring and another corresponding ring is on the moveable head. This head hangs on a swinging crane twelve feet high, so accurately balanced that one person can close the heavy door with ease. A pure rubber casket is set into a groove in the cast-iron rim about the head and a corresponding projection is on the stationary ring on the end of the cylinder. This front door or head of the cylinder is semi-elliptical in form and is what is called in mechanics, a bumped up head. The rear end of the cylinder projects about five feet and is hemispherical in form.

Extending out in front of the cylinder is an iron track six and a half feet wide securely bolted and braced by double iron braces and hung from the beams overhead. On this track three carriages of five racks each are hung for the handy exposure of clothing. A wire net guard long and wide enough to fasten up over the ends and sides of the rack is used to protect the clothing from contact with the piping or from falling into the cylinder.

As soon as steam is up, the clothes-rack is drawn by ropes hung on pullies into the cylinder, the two adjustable bars connecting the track outside with the track inside the cylinder removed and the great head swung to on the crane. The cylinder is then closed and fastened by means of thirty-six eye bolts swung on pins working in slots cut in the projecting rims on the open end and moveable head of the cylinder. The rubber gasket forms an air-tight joint. At the moment of closing the thermometers at the front and rear ends register about 156° F. This dry heat is applied for nearly thirty minutes or until it reaches in the neighborhood of 180°. Then the moist heat or vapor is turned on and a pressure of seven pounds of steam applied. When the temperature of the cylinder reaches 235°, the vapor is turned off by closing the main valve. A fall of temperature is facilitated by opening the valve connected with the drain

Digitized by Google

pipe which allows the hot steam to escape, cooling off the temperature rapidly until it reaches 180° again. There is no danger of burning or scorching anything with the temperature of dry heat maintained which is from 180 to 190°. After the clothes rack has remained a few moments longer all the valves are opened and the steam turned off. When a large quantity of clothing is being steamed, by opening the head a few inches the operator can tell if the goods are dry by the amount of vapor which escapes. As soon as no vapor escapes on opening the head the connecting bars are put up, the ropes attached to the rear of the carriage and it is drawn out on the track.

When drawn out, a linen collar is as stiff and glossy as if it had not been wet. The moist steam permeates everything, saturating it with water, but the drying process is so thorough that not a sign of the action of water remains. Everything which is steamed comes out in perfect order, and the process occupies about one hour and thirty minutes.

The company guarantees that this process is perfectly harmless and will not injure the most delicate fabrics or colors. All kinds of leather, furs and rubber goods are excluded from the cylinder, as they cannot stand the heat.

Digitized by Google

Digitized by Google

CORRESPONDENCE.

DENGUE AT TAMPA 1890.

PORT TAMPA, FLA., July 19, 1890.

To Dr. R. P. Daniel, President State Board of Health, Jacksonville, Fla.:

DOCTOR—You can firmly contradict any rumors about yellow fever here, for there is none. I am still of my original opinion, expressed in a letter to you yesterday, that the epidemic which has prevailed has been mild Dengue. It has not been clearly marked, but yet the pain in head, back of neck, small of back and eye-balls, lasting with a slight fever, not over 103 degrees, of any of the cases, with a rash in a goodly per cent. of cases, has confirmed me in my diagnosis. It has attacked indiscriminately old, young, black, white, natives and Cubans,—those who had yellow fever in 1887 and other years, as well as newcomers From what I can learn it has been prevailing since the last days of June, and it is now about its subsidence. Dr. Weedon, on being questioned about it, says it is a malarial fever, and denies any epidemic tendency, and further says that if epidemic it is only malarial fever, and that epidemics of malarial fever can prevail. As supporting his theory he gives the evidence of quinine in three 10 grain doses as controlling the fever in twenty-four to thirty-six hours. Dr. Jackson thinks it is mild Dengue. Dr. Wall thinks it is la-grippe, and says his patients all complain of great oppression about the chest, and in one case he had circumscribed pneumonia with rusty sputum. He quotes freely from articles in the London *Lancet* in support of his views. I have had one case at the port; gave a cathartic at night, and following morning gave five grains of quinine; followed the following day with mild aperient.

The patients all complain of prodromic symptoms of malaise and langour for two or three days. Then are attacked with a chill or chilliness and the pains complained of as above noted. These are very severe and the aching in joints and limbs continues some days after the fever leaves. There is no nausea or vomiting. No irritable stomach Dr. Weedon has examined the urine in a number of cases with negative results as to albumen. Ybor City has had, I judge, more cases than Tampa proper. The settlement is partly in a swamp and the *bacillus malaria* plays an important factor in complicating all diseases occurring there. There has been no deaths from this disease.

Digitized by Google

I did not wire because I did not think it sufficiently important, particularly as I was not aware that inquiries had been made of you by the County Health authorities. There is really no absolute necessity for my remaining here in this neighborhood,—stlll as long as people will talk and write and we can't control them, it may be a matter of "public policy" for me to stay here quietly for a few days longer. Mr. Henderson was very glad to see me here, and the physicians have been very courteous Dr. Wall took me very promptly to see cases that he had on hand.

Yours truly,

(Signed) JOSEPH Y. PORTER,
State Health Officer.

PORT TAMPA, July 30, 1890.

To Dr. R. P. Daniel President State Board of Health, Jacksonville, Fla.:

DEAR DOCTOR—The epidemic of dengue which has been prevailing at this place for the past month still continues with little if any disposition to "let up." The cases are mild in character, and although from rough estimates furnished me by the physicians, I judge that there have been between three and four hundred cases I fail to find any death recorded from dengue. I personally examined to day the death certificates for the month, as kept in the city Sextons office, and find up to date that there has been sixteen deaths from all causes, and but one from what I should be inclined to diagnosticate as typhoid fever. The certificate in question was signed by a Cuban physician, the deceased being also a Cuban, of twenty-one years, and cause of death given as "Pernicious Fever." I have asked the County Board of Health to investigate this case, which will be done this P. M. The mistake is often made by Cubian physicians, speaking but sparingly of English in confounding pernicious and typhoid fevers in their terms. This epidemic of Dengue manifests a disposition to spread along the line of railroads; for I hear of cases at Seffner, twelve miles distant from here, and also at Lakeland, thirty miles up the road.

Yours respectfully,

(Signed) JOSEPH Y. PORTER,
Ssate Health Officer.

Digitized by Google

MEMORANDA OF CASE OF EDGAR L. WARREN AT ST. AUGUSTINE.

Memoranda case of Edgar L. Warren, Anglo-American: Aet. 17; native of Key West; never away from Keys until a few days since. Arrived in St. Augustine Thursday, July 17th, direct from home. Quite well, except that has had some old trouble with testes; don't know nature of. Also has had formerly more than one sudden and grave illness, apparently of a bilious nature, and from which he would promptly recover. Bathed in swimming pool at Casino on Friday; remained in half an hour or more, and exercised vigorously with rings. Complained of pain in testicles soon after and had a chill. Suffered more or less intensely with pain in his testicles from this time. Stomach was very irritable and hard to keep anything on it. Restless and could not sleep. No better Saturday. Had purgation from some medicine. Rested better Saturday night. Same on Sunday. During Sunday afternoon appeared worse rather than better and Dr. Alba was called. Pulse found 125 or 130, temperature 106°, tongue slightly coated, and very dry. Skin dry. Left pupil very dilated; right less so. Brain not very clear. He was put upon doses of calomel, and also antipyrine in ten grain doses. There was no material "light" up to the symptoms. Temperature dropped to 104° and pulse to 118 during Monday afternoon under the use of antifebrine. Bowels seemed to respond to calomel and urine appeared free enough. No examination was made of it. Brain seemed less obtuse during Monday, but stomach scarcely less irritable. Monday night seemed to promise a better night, but was taken with rigor about late bed time; it lasted but a few moments, when reacted and complained of great heat; later got up on commode and had a spasm while up. This passed off. Half an hour or longer after had a second and died quietly a few minutes after, about 2:30 A. M. Tuesday morning.

ST. AUGUSTINE, FLA., July 23, 1890.

Post mortem made on the body of Edgar Warren, Aet. 17. Present: Drs. W. F. Shine, E. M. Alba, J. K. Rainey, C. J. Burroughs and R. P. Daniel. *Post mortem* made by Drs. Shine and Burroughs. Notes kept by Dr. Daniel.

Thirty three hours after death. Body was embalmed seven hours after death.

Appearance of cadaver: No observable emaciation; no rigor-mortis; complexion swarthy and not clear rather than yellow. Cuticle on hips and thighs and posterior portions of trunk peels easily on handling. Superficial blood vessels on portions of body distended and dark.

Eyes: Pupils dilated; sclerotics clear. Testicles much enlarged and indurated. Incision made from upper extremity of

Digitized by Google

sternum to pubes and transversely four inches above umbilicus. Sternum with costal cartilages was turned back. Both lungs highly congested and dark. Heart flabby; walls abnormally thin. Right ventricle containing more or less coagula. Left empty.

Abdomen not enlarged or tympanitic; when opened, contained quite an unexpected amount of fluid, as did also pleural cavities. Omentum and intestines did not look congested. Liver externally rather pale with mouted or ecchymosed spots, and somewhat enlarged. Section of right lobe a very dark red with abundant bloody oozing and breaking down easily. Left lobe more approaching to normal appearance, but the same in less degree. Gall bladder distended with greenish black bile. Spleen externally pale, somewhat enlarged; on section very dark, engorged with fluid blood and substance very pliable.

Stomach externally irregularly pale and high colored. When opened, contained some five or six ounces of dark green fluid with tinge of bile and some little curd of milk. No appearance of blood, and mucous membrane of organ perfectly intact; of a rather pale and yellowish hue, with congested blood vessels scattered over.

Small intestines moderately empty; no particularly high coloring; containing some greenish, semi-fluid fæcal matter.

Bladder empty. Kidneys about normal size, unnaturally dark, particularly in tubular structure.

(Signed) W. F. SHINE, M. D., President St. Johns County Board of Health.
E. M. ALBA, Attending Physician.
J. K. RAINEY, Consulting Physician.
C J. BURROUGHS, M. D, Health Officer, Jacksonville.
R. P. DANIEL, M. D., President State Board Health.

EXTRACTS FROM THE MINUTES OF THE BOARD RELATING TO THE BIDS FOR THE MULLET KEY QUARANTINE STATION CONSTRUCTION.

JACKSONVILLE, FLA., April 3, 1890.

* * The Secretary then informed the Board that upon a full explanation to the Governor and Comptroller of the necessities of the State Board and the embarrassment it found itself in by want of sufficient funds to complete certain quarantine work deemed essential for the preservation of the health of the public of the State; it was decided and agreed upon that certain financial arrangememts suggested by the State Board of Health would be approved of by the Governor and Comptroller and the war-

Digitized by Google

rants for the amounts required would be issued under certain conditions, which were then explained. The Secretary further stated that upon his return to the office of the State Board, and after consultation with the President, he, in accordance with an understanding that he had with the other members of the Board after the adjournment of the meeting of March 8th, at Tampa, wrote letters to the several bidders of the iron and wood work for the proposed quarantine station at Mullet Key, Tampa, Fla , saying, "it has been decided to ask from the various bidders new bids or proposals for this work." "It is thought the bidders can better do themselves justice, and the Board also, in the preparation of new bids, therefore you are requested to submit a new bid for this work." To this notification he had received entirely new bids for the iron work and some new bids for the wood work.

The proposals scheduled were then submitted as read, as follows:

Iron Work:

Merrill-Stevens Engineering Co., Jacksonville, Fla.—	
Bid February 28th	$ 9,865 00
Bid March 9th	9,715 00
H. Dudley Coleman & Co., New Orleans—	
Bid February 17th (on own specifications)	3,000 00
Bid March 29 (on Board's specifications)	7,000 00
Valk & Murdock Iron Works, Charleston, S. C.—	
Bid January 16th	6,450 00
Bid February 19th	5,900 00
Bid March 21st	6,300 00

Wood Work:

W. H. Crouch & Bro., Charleston, S. C.—	
Wharf	7,500 00
Buildings on same	5,000 00
Approach per lineal foot	4 50
S. G. Harvey, Tampa, Fla.—	
Wharf and buildings on same	11,650 00
Approach per lineal foot	3 75
W. H. Kendrick, Tampa, Fla.—	
1st Bid—Wharf and buildings	9,700 00
Approach per lineal foot	4 00
2d Bid—Wharf and buildings on same	11,000 00
Approach per lineal foot	4 00

Digitized by Google

Joseph Marzyck, Jacksonville, Fla.—	
1st Bid—Wharf and buildings on same . .	11,500 00
Approach per lineal foot	4 00
2d Bid—Wharf and buildings on same . .	10,965 00
3d Bid—Wharf and buildings on same . .	10,960 00
Approach per lineal foot	4 00
A. L. Shaw, Tampa, Fla.—	
Wharf and buildings on same	9,960 00
Approach per lineal foot	4 00
W. A. Miller, Sanford, Fla—	
Wharf	5,607 00
Buildings	3,194 00
Approach per lineal foot	3 00
Thomas White, Tampa, Fla.—	
Wharf and buildings	10,492 00
Approach per lineal foot	3 88
John Saunders, Jacksonville, Fla.—	
Wharf and buildings	10,600 00
Approach per lineal foot	3 90

* * * The consideration of the proposals and bids was then resumed and after due examination the bid of Valk & Murdock Iron Works, of Charleston, S. C., for the machinery of the disinfecting plant for $6,300.00 was accepted and the Secretary was requested to notify the firm, in accordance with the following resolution offered by Mr. Hyer:

WHEREAS, The bid of Messrs. Valk, Murdock & Co., of Charleston, for the construction and erection at Mullet Key Tampa Bay, of the disinfecting and fumigating plant, in accordance with the plans and specifications submitted, is lower than the bid of any and all others submitting estimates for same work; be it

Resolved, That the bid of Messrs. Valk, Murdock & Co., be accepted, and that the President of the Board is hereby authorized and directed to enter into a contract with Messrs. Valk, Murdock & Co., of Charleston, for the construction and creation at Mullet Key of the fumigating and disinfectiug plant, in accordance with the plans and specifications for the sum stated in the tender dated March 21, 1890, viz: $6,300.00, and in addition to the cost of transportation of the machinery from Port Tampa to Mullet Key; and be it further

Resolved, That the President shall require Messrs. Valk, Murdock & Co. to enter into good and sufficient security for the faithful performance of the contract.

Digitized by Google

JACKSONVILLE, SATURDAY, April 5, 1890.

* * * The following resolution was offered by Mr. Henderson and adopted:

WHEREAS, W. A. Miller, of Sanford, having appeared before this Board in accordance with a notification from the Secretary, under instructions from this Board, that his was the lowest bid for the construction of wharf, approach thereto, and necessary buildings thereon, at the proposed quarantine station at Mullet Key, entrance to Tampa Bay, Fla., and

WHEREAS, Mr. Miller asks to withdraw his bid; be it

Resolved, That the President be requested and empowered to enter into contract with the next lowest bidder for the work, in such legal manner as will protect the interests of the Board and the public and expedite the work.

JACKSONVILLE, FLA., May 6, 1890.

* * * The President stated for the information of the Board and for record that in accordance with the resolution adopted at a meeting held April 5, 1890, that he had endeavored to enter into contract with Mr. A. L. Shaw, of Tampa, Fla., for the erection of the wharf and buildings thereon, at the proposed Mullet Key Quarantine Station, he being the next lowest bidder, Mr. Miller withdrawing. On communicating with Mr. Shaw it was found he did not wish the bid submitted March the 7th as holding good for the meeting of April 3, '90, therefore the next lowest bidder, Mr. Thomas White of Tampa, was communicated with and subsequently a contract entered into with him for $10,492.00 and $3.88 for approach, and a satisfactory bond for $25,000.00 was offered by Mr. White and accepted. The President also verbally stated that a contract had been completed with the Valk & Murdock Iron Works of Charleston, S. C., for the construction of a disinfecting plant for moist and dry heat, also fumigating apparatus at a proposed cost of $6,300.00. The same to be constructed and erected at the Mullet Key Station to the satisfaction of the Board of Health.

Digitized by Google

RELATING TO THE OUTRAGE ON INSPECTOR COCHRAN AT BOCA GRANDE PASS, NOVEMBER 7, 1890, AND CORRESPONDENCE IN RELATION TO THE COAST SANITARY PATROL.

PUNTA GORDA, FLA, November 22, 1890.

Dr. J. Y. Porter:

DEAR SIR—On the 7th inst. I boarded a Spanish schooner, and demanded of the captain to have a look at his papers; I was answered by an order to leave the boat at once; I replied that it was my duty to see that vessels direct from Cuban and other Southern ports had no communication with anyone in this harbor; he said he was from Key West. I asked again from the captain to see his papers; he then exhibited them and they were in Spanish, and he hailed from Havana; I told him so, and they at once set upon me and threw me overboard, and then cut my boat loose and sailed on into the harbor, leaving me to find my boat as best I could, which I fortunately found and got back to the island. This was about 8 P. M. The next day I found them at anchor off LaCosta Key and saw boats coming and going from the vessel to the land.

The vessel had a Spanish name which I could not make out; but I will know her and can give you, if needed, a detailed description of her. He threatened me and also said he would return when he pleased. I verily believe they landed fifty demijohns of rum, from information I have since received from fishermen.

Please instruct me what to do, as the vessels from Cuba invariably threaten me or refuse to let me board them. Can you put a man with me so I can use my sloop? She is five ton and fast and I can overhaul any of them, and if you order I will board them with my Winchester, and use it if actually necessary. Please send me instructions at once.

I would suggest to the United States authorities to put an armed patrol under some sharp man, and it will certainly meet with several successful captures at this point, and break up this smuggling that is carried on with impunity.

When will my duty here cease? Please advise.

Yours truly,

(Signed) MORRIS COCHRAN.

P. S.—As they threatened to return, would it not be well to be ready for them at once.

Governor Francis P. Fleming, Tallahassee, Fla.:

SIR—I desire to invite your serious attention to the following resolution which was passed by the State Board of Health, at its last session in this city, viz:

Digitized by Google

Recognizing the necessity for a strict watchfulness over our coast of Florida during our summer season, now so near at hand, to prevent a violation of the rules and regulations establishing quarantine, and realizing our inability, for want of proper means, to have such a vigilant and effective coast patrol as seems necessary:

Resolved, That the President of this Board, through the Governor of the State, confer with the authorities at Washington, either with the Secretary of the Treasury, or with the Secretary of the Navy, or with both, for the purpose of securing such co-operation and assistance as may be in their power to render.

I would suggest that a boat (propellor) seventy-five feet long and about four feet draught of water, to carry about five men, would be all that would be required in the waters of this coast.

* * * I would desire to impress upon you the importance of this coast patrol and, as the control of the high seas within three leagues of the shore is vested by Congress in the General Government, it is but natural to expect that provision against smuggling on this coast from Cuba, with its attendant dangers of introduction of yellow fever in the same way, will be made by the General Government, under you, through the Treasury Department.

Please let me hear from you.

Very respectfully,

(Signed) JOSEPH Y. PORTER,
State Health Officer.

JACKSONVILLE, FLA., April 13, 1889.

To His Excellency, Francis P. Fleming, Governor of the State of Florida, Tallahassee, Fla.:

MY DEAR SIR—I enclose for your consideration a copy of a resolution passed by the State Board of Health lately in session, and would earnestly request that you forward it to the proper authorities in Washington, at the same time giving your earnest and cordial endorsement of the measure proposed in said resolution.

Unless the General Government comes to the aid of the State Board of Health of Florida, in patrolling the vast sea coast of the State, I do not see how it is possible, with the limited appropriation at our command, for the State Board to successfully cope with the large navy of smugglers that take refuge in the harbors and inlets, particularly along the western shore of the State.

Very truly yours,

(Signed) R. P. DANIEL, M. D.,
President State Board of Health of Florida.

Digitized by Google

JACKSONVILLE, FLA., May 17, 1889.

Governor Francis P. Fleming, Tallahassee, Fla.

SIR—* * * I am not sufficiently familiar with this portion of the coast and character of the traffic that needs overlooking to specify the best requirements for the coast guard duty around Florida. But my own judgment in regard to this matter, fortified by that of many intelligent citizens, who are familiar with the situation, and of the State Health Officer, in addition to the larger steamer for general observation along the coast, there is needed a boat drawing not more than three or four feet, and requiring a very small crew to handle, which could always search the small waters and refuges that are available to smugglers, and would thus prove very much more impressive and efficient.

Yours very truly,

(Signed) R. P. DANIEL,
President State Board of Health.

WASHINGTON, D. C., May 10, 1889.

Dr. R. P. Daniel, President State Board of Health, Jacksonville, Fla.:

DEAR SIR—In regard to properly supplying a system of coast guard to protect against the importation of diseases, I have to say that the Secretary of the Treasury has ordered a light draught steamer, the revenue cutter "McLane," which will take the place of the "Crawford," and will be enabled to run into such harbors and shoal waters as are infected by smugglers, and has had special instructions given for the protection against this illegal traffic.

Yours truly.

(Signed) JOHN B. HAMILTON,
Supervising Surgeon-General, M. H. S.

JACKSONVILLE, FLA., July 3, 1889.

To His Excellency, Francis P. Fleming, Governor, Tallahassee, Fla.:

DEAR SIR—I have already informed your Excellency that the State Board is unable, at least for the present, to scope with this question. We have appealed through you, and otherwise, to the Federal authorities for help in this matter, claiming that it is of national moment as well as of State interest, but thus far, although we have entered upon the most dangerous and epidemic season of the year, there has really nothing been done, so far as I am informed, that lessens the danger from this source. It is true that the "McLane," a steamer of light draught, has been substituted for the revenue cutter "Crawford," which

Digitized by Google

formerly patrolled this part of the coast; but the former even draws too much water to be effective in controlling the class of smugglers to which reference is made by Dr. Porter; and when we consider the length and character of the sea coast reaching from Cape Florida to Ceder Keys on the Gulf, you will at once recognize the utter inadequacy of such a service to the requirements.

Yours most truly,

(Signed) R. P. DANIEL,
President State Board of Health.

JACKSONVILLE, FLA., Jan. 9, 1891.

Hon. John B. Hamilton, Surgeon-General, U. S. M. H. Service, Washington, D. C.:

DEAR SIR—Will you be kind enough to inform me at what time you expect to have the Quarantine Station at Tortugas thoroughly equipped with disinfecting apparatus and steam tug with fumigating appliances for sea-going purposes, which appurtenances I have been led to understand would be furnished that station, and that it would be thoroughly equipped in all respects for scientific work?

Please let me know when you expect to have the station completed.

Thanking you in advance for this kindness, I am,

Very truly yours,

JOSEPH Y. PORTER,
State Health Officer of Florida.

WASHINGTON, March 17, 1891.

Dr. Joseph Y. Porter, State Health Officer, Jacksonville, Fla.:

SIR—In reply to your inquiry in regard to the Quarantine Station, at Tortugas, you are informed that plans are now being perfected for the erection of a wharf, which it is hoped will be speedily accomplished; also that a steam vessel will be provided for this station during the coming season; and that a disinfecting apparatus, appropriation for which is already made, will be placed on the wharf.

Respectfully yours,

JOHN B. HAMILTON,
Supervising Surgeon-General, M. H. S.

Digitized by Google

CORRESPONDENCE WITH THE LOUISIANA STATE BOARD OF HEALTH.

JACKSONVILLE, FLA., July 28, 1890.

Dr. S. R. Olliphant, President Louisiana State Board of Health, New Orleans, La.:

DEAR SIR—I am informed that your board, at a meeting on the 10th inst., passed a resolution, forbidding passengers from Cuba, via Florida ports, to enter New Orleans, without a detention of five days at your Quarantine Station, at Rigolets. May I ask if such information is correct? And may I also ask if similar restrictions are placed upon passengers from Cuba, via New York, or any other State in the Union, except Florida, and if so how you propose to enforce such restrictions?

I earnestly invite your attention to the fact that passengers from Cuba for Florida are required to be acclimated, that is to say, had Yellow Fever, or have lived sufficiently long in cities or towns annually subjected to this disease as to warrant them as being known as acclimated and perfectly safe so far as this disease is concerned.

The baggage of such persons, if destined to a point beyond 38° 54′ N. L. (Washington, D. C.) is not subjected to disinfection at any of the ports in Florida. For points below this latitude they are subjected to sulphur fumigation at point of arrival in this State. The State Board of Health is now constructing a disinfecting station (similar to the one operated by your board) on Mullet Key, entrance to Tampa Bay, and hope soon to have it completed, when baggage will be subjected to moist and dry heat disinfection.

Reverting to the subject of certificates of acclimation, I beg to call your attention to the proceedings of the Quarantine Conference held in Montgomery, Ala., last year, and to page 23 of the same, in Section 11 of which will be found "and to such certificates full credence should be given by all health authorities." Although this section applies to Yellow Fever in this country, I do not see that the same credence should not be given to the representative of the National and State Government at Havana.

A member of your Board, and President of the same, was a member of this Quarantine Conference at Montgomery, and assented to the proceedings, therefore I fail to understand why a certificate issued by the State Board of Health of Florida will not be given full credence by the State Board of Health of Louisiana, and I earnestly protest, as State Health Officer of this State, against the assumption of the State Board of Health of Louisiana that passengers admitted into Florida are not safe, and threaten the health of this and neighboring States.

Digitized by Google

I would also remind you of the fact that the system under which communication is maintained with Cuba during the summer months—namely, the certificate system of acclimation,—meets with the approval of the Sanitary Medical Officer of the United States at Washington.

I beg that you will give this matter your earnest and careful attention, and will not arbitrarily condemn a system that carries with it the advanced principles of science as well as common sense.

Very truly yours,

(Signed) JOSEPH Y. PORTER,
State Health Officer.

NEW ORLEANS, LA., July 31, 1890.

Dr. Joseph Y. Porter, State Health Officer, Jacksonville, Fla.:

DEAR SIR: Your communication of the 28th inst. to hand. Enclosed you will find copy of the Proclamation issued by the Board of Health of Louisiana, which sufficiently answers your first question.

This action has been taken after mature consideration. This Board, from sad experience, has learned that admitting passengers by the certificate system from infected ports is hazardous in the extreme. It has been the cause in past years of introducing Yellow Fever into our city.

No ship from an infected port is allowed into this State, except through the Mississippi River Quarantine Station, where it is subjected to Maritime Sanitation and five days' detention. All passengers are detained with the vessel.

According to your custom and certificate system, our Quarantine Officer could take the passenger's personal statement, or, if the officer so desired, he could require the applicant to swear to the truth of the statement and then allow them to proceed into the city without detention. With our ideas of quarantine such a course could not be entertained for a moment. If we disapprove such course with our own shipping, why should we encourage it in others?

While we are inclined to give due credence to all official health reports, we can but see the weak points in this certificate system, and see how easily your authorized agent in Havana could be imposed upon.

Allow me to assure you that the action of the Louisiana Board of Health was taken, not from lack of confidence in the representative of the Florida Board of Health, or of the National Government, but from a lack of confidence in the system, a lack of confidence in mankind when self-interest intervenes, and a lack of confidence in the means of getting information.

Digitized by Google

We deem it criminal in the highest degree to subject a community, and through it a large section of our country, to the risk of introduction and dissemination of a scourge like Yellow Fever, on the personal statement, even if sworn to, of irresponsible persons. When mankind has learned to sacrifice self-interest for the public good, when no man can be found who would conceal any facts to serve his own personal ends, then we might afford to take such risks, but not till then.

We have not deemed it necessary to place restrictions on passengers from Cuba via New York, simply because the time from Cuba to New Orleans via New York is at least seven days, whereas that via Florida ports is less than three days, and the latter time is not sufficient to cover the period of Yellow Fever incubation.

Our methods of enforcing our regulations have not been fully matured, but for the present we will keep supervision over every incoming train and take every Havana passenger to our Quarantine Station.

We regret that your State Board cannot see the danger that we conceive to be in the system, and trust that you will no longer think that we are arbitrarily condemning a system based on science and common sense.

Very respectfully,

(Signed) S. R. OLLIPHANT, M. D.,
President Board of Health State of Louisiana.

JACKSONVILLE, FLA., August 4, 1890.

Dr. S. R. Olliphant, President Board of Health State of Louisiana:

MY DEAR SIR—On the 2d inst. I received a communication from Dr. H. B. Horlbeck, Health Officer of the city of Charleston, asking an explanation of me of a statement which he had seen in the *New York Herald* of the 29th of July last, to the effect that the Board of Health of Louisiana had quarantined against the State of Florida.

Not being able to procure a copy of the issue of the *Herald* referred to above, I was somewhat at a loss myself to explain this extraordinary statement, until yesterday, when the reception of your letter to Dr. J. Y. Porter, of the date of July 31st, enabled me to comprehend the situation and reply to Dr. Horlbeck's inquiries.

Dr. Porter, State Health Officer of Florida, to whom your communication was addressed, is in the southern part of the State on inspection duty, and will not, probably, be able to see or reply to your letter for some days, or possibly weeks to come, and I therefore feel it incumbent upon myself to answer it. There are some points upon which I desire to define myself, in connec-

Digitized by Google

tion with your communication, and I shall endeavor to be as brief and concise as possible.

In the first place I fully recognize that "self-protection is the first law of nature" and do not claim that the agreement entered into by the several State Boards of Health, through their representatives at Montgomery in March, '89, or any other conclusions or agreements of a like character, could either compel or authorize any Boards or individuals, charged with the care of the public health, to knowingly and intentionally permit any jeopardy to the interests in their charge, which they were able to prevent or lessen. But I do claim that common as well as official courtesy is always desirable, and an element of intercourse with one another in the execution of our several trusts that we have a right to expect, as well as it is our duty to extend; and I certainly protest against the issuance of a quarantine proclamation by the State Board of Health of Louisiana, which virtually puts into contempt the reliability of the Rules and Regulations of the Board of Health of Florida, without serving notice even of such intention upon the latter body, furthermore, leaving me, as its representative, to be informed of such action through the public prints.

It was not just to either ourselves or to the public interests and convenience in our charge.

The next point to which I desire to call your attention is in connection with the position taken by you that selfishness is so inherent and predominating a trait in human nature that, in matters pertaining to quarantine particularly, we would not be warranted in risking the health of communities and States upon personal veracity. I regret to admit that I am in entire accord with you in this, and am therefore the more surprised and disappointed that your action does not accord with your expressed convictions. You rely virtually upon individuals and business corporations to give you information of themselves in these matters and refuse to trust those who have been specially charged with the care of the public health and may reasonably be presumed to have a more intelligent, as well as conscientious, appreciation of these obligations. You send special inspectors down here to watch over us and report as they please, without our knowledge. You have sent an agent this year who is not a physician, even; has never had yellow fever, and consequently Dr. Porter was compelled to forbid his going on the "Mascotte," as, under our present Regulations, no one, during the quarantine season, is allowed to board the ship when at Port Tampa who has not been thus acclimated. Of course, we are pleased to meet and facilitate your agents in everything which they may desire to take cognizance of in connection with our quarantine operations, if such knowledge is of any interest to you, or the

Digitized by Google

Health Board over which you preside. Georgia and Carolina are, however, both of them, more immediately interested and jeopardized than Louisiana, and yet they have seen proper to trust us thus far. I am not using this as an argument that you should do so, understand me, my dear sir. One other point remains to which I desire to direct your attention.

You animadvert upon the insufficient security of relying upon methods of precaution and care at the point of departure so largely, and rightly, and state that this has not proved itself altogether trustworthy in the past. Of course all methods of precaution against invasion by disease *where intercourse is allowed at all*, are to some extent uncertain; even your own most admirable system, based upon scientific experimentation, erected and sustained by abundant financial ability, and concentrated upon one great point of danger to guard and defend, must have more years of experience before certainly and perfection can be claimed for it.

A system of observation and authoritive supervision by responsible government officials at the point of departure will, in my judgment, enter largely as a factor into the quarantine systems of the future; but while I should hesitate to attach much weight to such outpost duty as it is at present performed, ordinarily, I have large reliance on Dr. Burgess in this connection; his well-known capacity and long experience in Havana, as well as his earnest desire to co-operate with the Board of Health of Florida in its efforts to prevent the importation of disease into this country through our own State, warrants me in expressing confidently the opinion that, with Dr. Burgess at Havana, with ships builts and operated as are the "Olivette" and "Mascotte" and with our requirements for managing the same in connection with our methods at Port Tampa, there is a minimum of danger that Yellow Fever will be imported through that channel. Our chief risks are through the irregular channels of intercommunication, and, had we felt it necessary to impose a quarantine of detention upon those ships, those risks and dangers would have been largely increased.

For intercourse will be kept up with Havana, and we must shape and direct a current which we can not arrest.

We are now making all haste, within our ability, to complete and put in operation a quarantine and disinfecting station at the entrance to Tampa Bay; as you are probably aware, these things cannot be done in a day, or a year either sometimes, but we have hopes of having the "plant" ready to operate next month. Meanwhile I will venture the assurance that you will not encounter any risks to the health of your city or State through Port Tampa or the "Mascotte."

Digitized by Google

In conclusion, my dear sir, allow me to assure you of the earnest desire of the State Health authorities of Florida to guard our own State, as well as yours, against the invasion of disease; and to suggest that you will respect our motives if not our *methods* in dealing with this momentous problem.

Very truly yours,

(Signed) R. P. DANIEL,
President State Board of Health of Florida.

OFFICE STATE BOARD OF HEALTH,
JACKSONVILLE, FLA., August 6, 1890.

It having been brought to the notice of this board that a certain proclamation issued by the Board of Health of the State of Louisiana, under date of July 29th, 1890, and promulgated without previous notice or protest to the Health authorities of Florida, has been given large publicity through leading newspapers over the country, and has been perverted into a reflection upon the health of our State, and that it is being utilized for detriment to our interests, it, therefore, appears to be my duty as President of the Board of Health of Florida to declare that the health of our State is good at this time, and that we have every right to feel that, under God's Providence, we shall not have any other than a like favorable report to make for the remainder of the year.

As the city of Tampa has been specially maligned in this matter, I give its mortality report for the month of July, 1890.

(Signed) R. P. DANIEL,
President State Board of Health of Florida.

TAMPA, FLA.—Estimated population, 10,000; death rate per 1,000 per annum, 16.8.

Number of deaths, 14. Chronic Diarrhœa, 1; Gastritis, 1; Heart Disease, 1; Convulsions, 1; Disease of Bladder, 2; Dysentery, 1; Gunshot Wounds, 1; Dropsy of Brain, 1; Brain Fever, 1; Meningitis, 1; Pneumonia, 1; Purpura hemorrhage, 1; Malarial Fever, 1.

NEW ORLEANS, LA., August 11, 1890.

Dr. R. P. Daniel, President Board of Health, State of Florida, Jacksonville, Fla.:

DEAR SIR—I beg to acknowledge the receipt of your communication of recent date, and to assure you that neither in the action taken by the Louisiana State Board of Health in quarantining Havana passengers, nor in my letter addressed to Dr. J. Y. Porter, was any discourtesy to yourself or the Florida State Board of Health intended, and I here protest against such accusation. Had the action of our Board been directed against your

Digitized by Google

State, you would have been officially notified and all common courtesy extended.

The proclamation of this Board of Health, which you and Dr. Porter have seen proper to take exception to, was issued with a view of carrying out our quarantine regulations against Havana. We most assuredly have some rights in the premises that should be respected.

While we would not presume to ask you to change your querantine system, or to adopt ours, we cannot and will not submit without an effort of resistance to having our rules and regulations continually violated.

The regulations of this Board have been established after years of experience in quarantine matters and we believe them to be good. We can not say to you to adopt our rules, but we can and do say to Havana passengers to stop and undergo the required period of detention and observation at the confines of our State. I think, my dear sir, we would be recreant to our trust were we to act otherwise.

The Quarantine Proclamation of the Louisiana Board of Health against Havana and other infected ports was published to the world months ago, and the presumption was that you and your Board were familiar with its terms. The recent proclamation was made only to put us in legal position to enforce the terms of the original proclamation on another approach to our city.

My interpretation of the action of the Quarantine Conference at Montgomery last year, differs widely from that put upon it by yourself and Dr. Porter. I cannot conceive that the certificate system as adopted was intended to apply to passengers from Havana. As I understand the action, it had reference to the outbreak of yellow fever in this country, and was for the purpose of allowing residents of infected cities or districts to depart without subjecting them to the cruelty attending the barbarous shotgun quarantine.

Although full credence was to be given to the certificates, provision was made for their reception in such communities only as were willing to receive them, and under such conditions as they thought proper; the communities receiving them to be the judges of these conditions. (See Resolution in answer to topic 3).

Section 11, referring to certificates, mentioned in Dr. Porter's letter and the one preceding it apply especially to the existence of yellow fever in this country and to such people as can produce satisfactory evidence "that they have not been in twelve days exposed to any source of infection."

The certificate recommended had reference to people who had not been exposed to infection regardless of whether or not they had been acclimated. I fail to find anything in the delib-

Digitized by Google

erations of the Conference recommending or justifying such methods as your Board has inaugurated. Again, quoting from Section 11, the one referred to by Dr. Porter, it recommends that "a uniform system of certificates should be adopted by Boards of Health. We would recommend the following form" (See page 23 of report of Conference), which you will readily see is widely different from the sample of certificate furnished me by Dr. Porter. The one applies to people who have not been exposed to infection, the otner to people who may be supposed to be acclimated.

I regret the occasion or necessity of our Board having to take such action as "virtually puts into contempt the reliability of the rules and regulations of the Board of Health of Florida," but, my dear sir, allow me to remind you that the rules and regulations of your Board, aside from the risk and danger we conceive to attend them, virtually puts our system into contempt, rendering it inoperative by the fect that our rules can be so easily evaded through your State. And should we recognize your system, at the same time not feeling justified in changing our rules to conform therewith, we would be guilty of the inconsistency of placing an unnecessary barrier on our own shipping and discriminating against our own interests.

The two sets of regulations, being based on different ideas diametrically opposed to each other, cannot be operated together.

You complain that we did not inform you of our intended action, and thereby committed a breach of courtesy. I would respectfully suggest that your quarantine regulations were formulated without any consultation with our Board, which is surely your privilege and one we also claim.

I would also state that the Louisiana State Board of Health, last year, protested strongly in a letter to you against this same custom.

Your accusation of inconsistency I will dismiss with the statement that I cannot think it logical or well founded, and with a regret that any personal feeling should creep into a correspondence that I consider purely of an official character.

It was not deemed necessary to send a physician as an inspector to Tampa, as the duties of the position were not of a professional nature. We consider our inspector acclimated, as he has been raised in this city and has been in the employ of the quarantine service of the State. The gentleman representing this Board last year at Tampa was a physician, and has had yellow fever, and yet your authorities refused him permission to go on vessels on their arrival from Havana. This very refusal implies that you recognize danger in these same ships to which you accord such extraordinary privileges.

Digitized by Google

One more point in connection with your system, if you will excuse me in contrasting your regulations with our own; we disinfect all clothing and baggage of passengers. After the contents of their trunks, etc., have been disinfected, they are required to don a disinfected suit, and the clothes then taken off are subjected to the same treatment. I am informed that your passengers walk right off without any detention further than is necessary to identify them by their certificates, and the clothes they wear, which may have been taken from their trunks within the hour of their arrivals, are not subjected to any disinfecting process.

I wish to return thanks for the various courtesies extended to our inspector, and assure you of our willingness to reciprocate should you ever feel called upon to send a representative to our State.

In conclusion, I trust that you will not feel that, though we cannot subscribe to your methods, your motives have never been questioned.

Allow me to show you that it is the earnest desire of the Louisiana State Board of Health to be in sympathy and perfect harmony with all neighboring health authorities, and while we may differ in opinion, we shall not be unmindful of the fact that we are working with the same object in view—the prevention and exclusion of disease.

Very respectfully,

(Signed) S. R. Olliphant, M. D.,
President Board of Health State of Louisiana.

Jacksonville, Fla., August 19, 1890.

Dr. S. R. Olliphant, President Board of Health of Louisiana, New Orleans, La.:

My Dear Doctor—Yours of the 11th inst., in response to my letter to you of recent date, came duly to hand.

I regret that there should have been anything in the matter or tone of my communication which should have caused you to consider that any *personal feeling* existed on my part in regard to the course taken by the Board of Health of Louisiana in regard to quarantine regulations. Permit me to correct any such misapprehension on your part. I have no *personal feeling* in the matter; and it would be quite ridiculous in me to entertain such. I have, however, most unwillingly accepted a responsibility for the State of Florida in the official position at present held by me, and in that capacity my protest was made, not personally against you, but against your official action. It is unfortunate that the impression should have gotten abroad that your Board has questioned the health of our State at this time.

Digitized by Google

I have not in any manner been a party to this misapprehension. But your proclamation of the 29th ultimo was being perverted by sensational or other interested parties to that purpose; and, consequently, was injuring our State's interests, and made it my duty to publish the statement which I did. There are several other points in your letter which can be responded to by Dr. Porter, perhaps, with more propriety than by myself, and I have therefore turned them over to him.

I cannot, however, close this, my dear sir, without giving you my renewed assurance of a sincere desire on my part to have our official relations work in more harmony of accord, which shall most happily accomplish our common object, i. e., the protection and promotion of the health and prosperity of our respective States.

Believe me, very truly yours,

(Signed) R. P. DANIEL,

President Florida State Board of Health.

CORRESPONDENCE IN REGARD TO ANNUAL INSPECTIONS UNDER SECTION 12 OF THE ACT CREATING A STATE BOARD OF HEALTH.

JACKSONVILLE, FLA., January 19th, 1891.

To His Excellency, Francis P. Fleming, Governor of Florida, Tallahassee, Fla.:

MY DEAR SIR—Section 12 of the act creating the State Board of Health provides for annual inspection by the State Health Officer of all cities and towns in the State between the first of November and the first of May of each year. As you are aware, circumstances prevented this being executed during the winter and spring of '89 and '90, on account of the cases of yellow fever in Key West during the fall and early winter of those years, which kept the State Health Officer in that portion of the State. Some few inspections were made of the towns and public institutions; notably, the State Asylum and convict camps at Monticello.

In consultation with the President of the Board, it was deemed advisable, by both the President and myself, to consult with you as to the expediency of incurring the expense to the State of carrying out the provisions of this section of the act.

The State Board of Health has been in session during the past week, and the matter was brought up then. The position taken by Mr. Hyer, of Pensacola, was that the law required it and it should be done, although he did not insist upon it. I think that Dr. Daniel and Mr. Henderson are both under the impression that, while it would result in much good, yet the

Digitized by Google

present financial condition of the State will not warrant expenditure from its funds for this purpose, which must necessarily be quite large—several hundred dollars. I am thoroughly in accord with this opinion; and, therefore, the President of the Board and myself have deemed it advisable to submit to you whether he or myself would be held censurable by the State Legislature for a violation of this section which relates to inspections. There are one or two points in the State which I should like to visit before the next annual report is made up, but I really do not think that it is demanded in the present condition of affairs that I should literally carry out the requirements of the first portion of that section in regard to these inspections.

This office has done much in the past year in correspondence and is still doing much, to stimulate the people and officials in carrying out this important work of sanitation, which will result, if carried on for a few years longer, in great benefit to the State, both to the people that are now here and those who, by immigration, it is hoped will be induced to settle in the State.

Much could be done if the Board had at least one paid representative in each county of the State, who would gather up vital statistics of the births, marriages and deaths and forward them to the central office for consolidation, publication and distribution.

* * * The quarantine system of the State should be under one body, with power to appoint its own officers, collect its own fees and pay out its own money. And I think if this was done there would be less complaint in the counties along the seaboard, particularly in the southern portion of the State.

Dr. Daniel, President of the State Board, will write you on these matters, and at your convenience I should like to hear from you, as there is not much time left in which to execute the work referred to in the first portion of this letter.

Very truly yours,

(Signed) JOSEPH Y. PORTER,
State Health Officer.

TALLAHASSEE, FLA., January 19, 1891.

Dr. Joseph Y. Porter, State Health Officer, Jacksonville, Fla.:

DEAR SIR—I am in receipt of your favor of the 17th. Upon examination of Section of the Act to create and establish a State Board of Health, it appears to me that the matter of inspection of cities and towns is in the discretion of the Board of Health. By a careful reading of the Statute, I am impressed that the words "which, in the judgment of the Board, may be necessary for him to inspect" applies to "all cities and towns," and that no further inspection is necessary than such as the Board may think necessary. This interpretation of the law

Digitized by Google

would appear to me more consonant with sound reason, and in keeping with the intention of the Legislature. It appears to me, however, that it would be well that there should be an inspection of such places in the State as the Board think advisable without going to the expense of inspecting every city or town or other point at a railroad crossing. * * *

Very truly yours,

(Signed) F. P. FLEMING.

JACKSONVILLE, FLA., January 20, 1891.

Dr. R. P. Daniel, President State Board of Health, Jacksonville, Fla.:

DEAR SIR—I enclose herewith a communication from His Excellency, Governor Fleming, of the 19th inst., in regard to Section 12 of the Act to create and establish a State Board of Health, relating to inspections to be made by the State Health Officer between the first of November and the first of May of each year, as may be ordered by the State Board of Health.

All correspondence in this matter has been laid before you, and is now on file in this office. You will please note what the Governor says, and kindly inform me whether, under the present financial status and embarrassment of the State, it is your desire that I make the inspections called for under the Statute referred in its literal sense, or if you desire only special inspections to be made, you will please do me the favor to designate the points that it is specially desired that I shall visit.

An early response is respectfully requested.

Very truly yours,

(Signed) JOSEPH Y. PORTER,
State Health Officer.

JACKSONVILLE, FLA. January 24, 1891.

Dr. J. Y. Porter, State Health Officer, Jacksonville, Fla.:

MY DEAR DOCTOR—Referring to the correspondence between his Excellency, Governor Fleming, and yourself, in regard to that Section of the Act creating a State Board of Health, which directs that you should visit and inspect the cities and towns and railroad crossings in the State of Florida annually, in the intervals between the close of one quarantine season and the commencement of the next; and which correspondence has been laid before me for an expression of opinion as to its execution; I will say that I have already, in my first annual report to the Governor, stated that I considered it practically impossible to execute this part of the law unless the services of the Assistant State Health Officer were utilized for that purpose; and this course I do not think we would be justified in taking, nor do I believe that the law contemplated any such action.

764911

Digitized by Google

As a result of the course which the State Comptroller thought proper to take in regard to the assessment and collection of taxes, the health department of the State has been deprived of the revenue provided for its support last year; and the expenditures made, therefore, for two years have virtually to depend for their liquidation upon the income from one.

The urgent indication that has been recognized by the State for the erection of a first class quarantine and disinfection station at the mouth of Tampa Bay, and the purchase likewise of a steamer to act as a tender to this station, and for police duty on the adjacent coast, have largely drawn upon this reduced revenue.

Under these circumstances I think it would be unadvisable, just at this time, to subject the State to a largely additional outlay, which would result from any attempt to execute the portion of the Act referred to, in a literal way. There are a few points in the State which should be visited; notably, Tampa and Key West, as well as such other places in the Southern portion of the State as may appear, in your knowledge and discretion, to need such inspection during the winter season; and, in addition, I would advise that you visit Tallahassee and inspect, not only the general sanitary condition of that place, but that you particularly visit and examine the State Capitol before the next session of the Legislature. I am, very truly yours,

(Signed) R. P. DANIEL,
President State Board of Health.

CORRESPONDENCE WITH MUNICIPAL AUTHORITIES OF KEY WEST, FLA.

KEY WEST, FLA., July 19, 1890.

Dr. J. Y. Porter, State Health Officer, Jacksonville, Fla.:

DEAR SIR—I am instructed by the Honorable Board of Commissioners of this city to communicate with you and ascertain your opinion as to whether a perfect system of the Oderless Excavator with good surface drainage would be better for this city than a system of underground sewerage.

If you remember during your last visit to this city in a conversation about the sewer system I understood you to say that with good surface drainage, water tight closets, and a perfect system of the Oderless Excavator it would be better for us than an underground system of sewerage.

I mentioned the fact to several of the Commissioners, and hence my instructions.

I am also instructed to request a reply at your earliest convenience. I am, very respectfully,

(Signed) WM. L. DELANEY.
City Clerk.

Digitized by Google

PORT TAMPA, FLA., August 12, 1890.

To the Hon. Board of City Commissioners, Municipality of Key West, Fla.:

GENTLEMEN—A reply to your query regarding the safety, in a public health sense, of the substitution of cemented vaults and pits and oderless excavator system for any system of underground sewerage *that has yet* been proposed for the island of Key West, calls for not only an affirmative or negative answer, but also an explanation thereof. The subject is one that should have most careful consideration, and upon which much could be written; far more than a breaf letter will permit, and I have delayed giving your courteous communication an answer this long in order that no hasty opinion might be formed on my part and given, and that I might condense what I have to say as much as possible, consistent with the importance of the subject.

I have never seen the plan proposed by Prof. Johnson, for underground sewerage at Key West, and had but a few minutes inspection of the diagram of the West system, when Mr. West was passing through Jacksonville to his home; therefore it would be unwise for me to criticise propositions that I am not conversant with, but it will be both proper and consistent for me to state what I think should be the principles which should guide your Board in arriving at a decision as to whether an underground system of sewerage should be adopted or not.

I would advise, first, that in the adoption of *any* system you give preference to the "separate" system, that is—the separation of storm and surface drainage from house drainage. Second, that sewers should be constructed for capacity not only to carry off water, but ability to keep clean, and to accomplish this object this should be so devised as to have the requisite *inclination* as well as smoothness and uniformity of surface. Waring, in his book on "Sewerage and Land Drainage" (page 59), says: "The rate of inclination of the sewer is not necessarily at the rate of inclination of its invert, but at the rate of inclination from the surface of its water, at a given point to the surface of its water at the outlet. Where no difficulty is to be apprehended from setting water back into the house drains, or lateral sewers, that is where the only thing to be guarded against is, the overflow at the top of the man-holes; the water may be allowed to rise nearly to these overflow points, and the capacity for discharge will be increased according to the hydraulic head thus gained."

All sewers should have a velocity of flow through them of not less than one (1) foot six (6) inches per second, and wherever it is possible or practicable, of two (2) feet per second.

Digitized by Google

The following table of grades for sewers based upon this principle is thus given by Waring:

6	inch	sewers;	fall	per	hundred	feet	1 to 300
8	"	"	"	"	"	"	1 to 400
10	"	"	"	"	"	"	1 to 500
12	"	"	"	"	"	"	1 to 600
15	"	"	"	"	"	"	1 to 750
18	"	"	"	"	"	"	1 to 900
20	"	"	"	"	"	"	1 to 1,000
24	"	"	"	"	"	"	1 to 1,200

Flush tanks play an important part now in sanitary engineering as assistants in keeping sewers clean, and they should not be omitted or lost sight of by your Board in the adoption of any system of sewerage for Key West. An adequate supply of water, either salt or fresh, is an imperative necessity in operating sewerage, and this method of the disposal of wastes from the city should never be entertained unless it is proposed to build water works, either of fresh or salt water, the latter being perfectly adaptable for this purpose.

I have diverted from the main question propounded to me in your communication, for the reason that *if* the propositions of Prof. Johnson, or others, to construct a system of underground sewerage for Key West, meets the requirements that I have laid down, in their general application, then *I should not advise* adopting the cemented pit and odorless excavator system as a substitute for underground sewerage; and would go further and say that I disapprove of hiding filth of any kind, and the wastes from dwellings which are thrown on the ground, the house drains from kitchens into cesspools in the yards and the privy vaults, all contain deleterious agents, which, under the heat and moisture of our tropical climate, produce and give forth disease germs, which enter our houses and produce sickness and death; and *if it is a possibility* in sanitary engineering to provide each house with the necessary receptacles for these various classes of filth, to connect such receptacles with properly constructed and amply ventilated drains, and to discharge such drains into properly constructed, adequately ventilated and surely self cleansing sewers, it would free the house and the community from its own incumbrances and dangerous products of animal waste, and be decidedly our duty to adopt.

I fully appreciate the magnitude of the responsibility devolving upon the Municipal Commission in deciding this question, and recognize that in "festina lente" your desire has been to make no mistake. If any plan for underground sewerage that may be submitted to you is not a practical problem, capable of engineering solution, and has any atmosphere of doubt surrounding it, as to its sanitary workings, I would advise that you reject

Digitized by Google

it. It is certainly better to "bear the ills we have than to fly to others we know not of," and a badly constructed and defective sewerage system would be productive of greater disaster than now threatens the Island from perennial "continued" fever, or occasional yellow fever; in fact, it would prove a decidedly powerful coadjutor of those diseases.

I am of the opinion that no uniform, that is, one general system of sewerage, applicable to the whole city, can be devised—one that will thoroughly dispose of the excremental and other wastes from dwellings and manufactories of the whole Island, and that will meet all necessary demands and requirements. The topography of the Island makes it impossible, in my opinion, to construct a safe and complete sewerage by natural grade or inclination even with the aid of flush-tanks located at short distances. There are some sections of the city that could be properly sewered in the usual way; others could, with the aid of pumping stations be freed through sewers of the organic wastes from such quarters, but a large area of the city could not be provided with any underground sewerage with safety at all; and it is a question to be deliberated upon, and thought of, if there would be any equalization of expense of operating a sewer system in certain sections of the city and the cemented vault and odorless excavator in other portions.

I do not wish to be understood as being *opposed* to sewerage for Key West. I am, on the contrary, *in favor of it*, but I would construct the system only in that area of the city where the grade will permit of sufficient fall, and then only after a supply of water, free and ample, is furnished. In the sections of the city where, by reason of the flatness of surface and want of sufficient grade, it would be unsafe to construct sewers, cemented vaults, made absolutely water-tight, of limited size and capacity, so as to compel frequent emptyings, should be insisted upon, and compelled by law to be used. These vaults or pits should not be over two feet above ground, nor two feet below the surface, and two feet in width, and not over four feet in length—this depending all together on the number of openings in the closets. These pits should be emptied by the odorless excavator as often as they are filled, and the contents should be daily treated to a plentiful supply of germicide and anti-ferments.

I make no mention of the pail, tub or trough system, for, though it can be made to work efficiently, yet it is very seldom but that it is offensive and requires great care and expense to prevent it from becoming a sanitary nuisance. Great vigilance must be exercised by the municipal authorities to prevent the pails becoming very offensive in transportation for emptying, and individuals themselves maintain an apathy to their closets, which is unexplainable, when the same individual would scorn the idea of having a foul-smelling vessel in his or her dwelling.

Digitized by Google

I think I have briefly answered your question as to the expediency of substituting the cemented pit and odorless excavator system for any plan of underground sewerage already proposed for Key West. My advice to you *is to adopt a sewerage system* for that area of the Island where the grade will permit it, and where it is not practicable to have sewers, with or without pumping stations, then adopt the small cemented vault with the odorless excavator and liberal use of germicides.

While recommending this latter, where the former can not be used, it is clear to me, and I would impress the same upon you, that the only method that can be considered *universally effective* and applicable for the disposal of human wastes is that of removal by water carriage. Water is surely the best vehicle, when properly controlled. for the removal of the discharges of the kitchen sink, or laundries, lavatories, and water closets and urinals.

In adopting the cemented vault for the disposal of human excrement, the question will confront you, what will you do with the house slops, waste water from laundries, bath tubs and sinks? This water contains animal and vegetable matter in solution, and is capable of putrefication and fermentation, and must be disposed of in a manner as not to affect the public health. Shall it be thrown on the ground? What then shall be done with this large amount of waste water? Supposing that it is your intention to have cemented and surface drains on each side of the street; I would advise that the waste water from all dwellings and houses be emptied into these drains and then flush the drains once a week, or oftener, if necessary. Here again I premise that a water supply is one of the sanitary improvements in contemplation for Key West. It is absolutely necessary, for without it no system of sewerage can be effective, nor without it can any cleansing of street drains be properly done. * * *

Very truly yours,

(Signed) JOSEPH Y. PORTER,
State Health Officer.

JACKSONVILLE, FLA., January 13, 1891.

To the Honorable Board of Commissioners of the Municipality of Key West, Fla.:

GENTLEMEN—I herewith acknowledge the receipt of a communication of the 9th inst. from your clerk, requesting to be informed "what would be necessary to place said city (Key West) in such sanitary condition as will satisfy the State Board." I desire to thank you for your prompt reply to my letter of the 6th inst., and submit the following, as in my judgment, to be necessary to insure a condition of sanitation for the City of Key West:

Digitized by Google

First—The enforcement of ordinances for the cleanliness of public thoroughfares and private premises; garbage and refuse heaps should not be permitted to remain over twenty-four hours without removal.

Second—A cremating furnace should be erected for the prompt and sanitary disposal of offal, garbage and night soil and filth of every description; or dumping scows should be built and operated for this purpose. It is inimical to the health of the citizens of Key West that dumping grounds should be maintained on the Island of Key West, and the site of the present dumping ground, to the windward of the inhabited portion of the Island is a particularly objectionable nuisance in a health point of view, and should be immediately abated.

Third—The city should be provided with separate systems of sewerage and drainage, and every householder should be required, whenever practicable, to have sewer connection; where it is not possible or practicable to have sewer connection, then the pail or bucket system for the collection and disposal of human excreta should be ordered and operated; this latter system would be at a trifling expense to the householder, and under proper management could be made self-sustaining, if not a source of revenue to the city. The pit system should be abolished as soon as possible, but until proper sewerage can be constructed the objectionable features of the pit system can be lessened by requiring the pits to be water-tight by hydraulic cement, and emptied by the odorless excavator when necessary; at no time should the pits be filled to a foot of the ground surface, and should at all times be liberally treated with germicides and deodorants combined.

Fourth—An abattoir should be constructed over tide water and operated by the city; the advantage of a public slaughter house, where animals can be inspected on the hoof before being killed for human consumption, is so patent as to require no further comment.

Fifth—At an early date a public market should be erected and conducted under the direct authority of the city; if the private markets are essential to the convenience of the public in the outlying portions of the city, they may be allowed, but always subject to the inspection of the police, who should be required to daily perform their duty in this respect.

Sixth—The streets of the city should be graded, crowned and curbed with cemented surface drains on one or both sides for carrying off storm water. Sidewalks would add much to the beauty of the thoroughfares and to the comfort of the pedestrians, but are not essential to the sanitation of the place.

Yours truly,

(Signed) JOSEPH Y. PORTER,
State Health Officer.

Digitized by Google

KEY WEST, FLA., February 23, 1891.

To the Hon. Board of Commissioners, Municipality of Key West, Fla.:

GENTLEMEN—Aware of the sentiment expressed at various times by individual citizens and committees of your city, which prefers for Key West such restrictions upon intercourse with all other parts of the State as may result in a complete severance of the same during the quarantine season from May to November, in order that this community may enjoy unrestrained intercourse with Cuban and other foreign ports, I respectfully write you as the representative of the people here to devise some plan which may be submitted through me to the State Board of Health for their consideration at the second annual meeting to be held in May next.

Your earliest attention will greatly oblige,

Yours very truly,

(Signed) JOSEPH Y. PORTER,
State Health Officer.

KEY WEST, FLA., March 24, 1891.

Dr. J. Y. Porter, State Health Officer, Jacksonville, Fla.:

SIR—I am instructed by the Honorable Board of City Commissioners to furnish you with a copy of report of Special Committee to whom your communication in relation to quarantine restrictions for this city was referred.

I am, very respectfully,

(Signed) WM. L. DELANEY, City Clerk.

KEY WEST, FLA., March 23, 1891.

To the Hon. Board of City Commissioners, Municipality of Key West, Fla.:

GENTLEMEN—The committee to whom was referred the communication of Dr. Porter, State Health Officer, beg to report as follows:

I have called upon quite a number of citizens and have failed to find anyone that wishes to have the Island of Key West put under the same regulations as Cuba, during the quarantine season, excepting S. S. Lowe.

(Signed) WM. LEDWITCH.

Digitized by Google

☆DR. D. H. ARMSTRONG

THIRD ANNUAL REPORT

OF THE

THE NEW YORK
PUBLIC LIBRARY
F75152
ASTOR, LENOX AND
TILDEN FOUNDATIONS.

STATE BOARD OF HEALTH

OF FLORIDA.

JACKSONVILLE, MAY 2D, 1892.

JACKSONVILLE, FLA.
DACOSTA PRINTING AND PUBLISHING HOUSE.
1892.

Digitized by Google



Digitized by Google

THIRD ANNUAL REPORT

OF THE

STATE BOARD OF HEALTH

OF FLORIDA.

JACKSONVILLE, MAY 2D, 1892.

JACKSONVILLE, FLA.
DACOSTA PRINTING AND PUBLISHING HOUSE.
1892.

Digitized by Google

THE NEW YORK
PUBLIC LIBRARY
P 75152
ASTOR, LENOX AND
TILDEN FOUNDATIONS.
1901

OFFICERS AND MEMBERS

OF THE

STATE BOARD OF HEALTH OF FLORIDA.

HON. W. B. HENDERSON, President, Tampa, Fla.

HON. J. P. TALIAFERRO, Jacksonville, Fla.

DR. WARREN E. ANDERSON, Pensacola, Fla.

DR. JOSEPH Y. PORTER, State Health Officer and Secretary, Key West, Fla.

Office of the Board, Jacksonville, Fla.

Digitized by Google

LETTER OF TRANSMITTAL.

TAMPA, FLA., May 2, 1892.

To His Excellency, Governor Francis P. Fleming:

SIR—As President of the State Board of Health of Florida it becomes my duty to render you such report of the transactions of the Board during the past year, and to recommend such modifications in the law as will tend to enhance the usefulness of the Board, as may be deemed advisable. In consequence of the short time during which I have filled the office of President of the Board, there is but little to dwell upon other than to heartily approve the recommendations made in the reports of the late President, Dr. R. P. Daniel, and the State Health Officer, which are apppended, for your consideration.

I would particularly invite your attention to those portions of the reports mentioned, which deal with the necessity for the establishment of disinfection stations at Fernandina and Key West, which have been delayed this year by reason of lack of funds; the erection of a Boarding Station at Punta Gorda, with a physician in charge, which has been ordered by the Board; the valuable service rendered during the season of '91 by the State Quarantine Patrol Boat "Missoe;" and the urgent necessity noted for a change in the method of collecting the vital statistics of the State.

The existence of cases of leprosy in the State and the interpretation of the law in regard thereto, whether the Board is authorized to provide an asylum on Mullet Key and maintain these unfortunates at the expense of the State, is also laid before your notice.

The difficulty experienced by the executive officer of the Board in carrying out the regulations in regard to quarantine, through the division of authority with the County Boards of Health, is becoming more and more apparent as each quaran-

Digitized by Google

tine season comes around, and I am convinced in the belief, as is expressed by my distinguished predecessor, that the State Board of Health should operate and directly control all of the quarantines of the ports, instead of dividing this authority as under the present law with the County Boards of Health. It is believed that a more economical administration of health pretection can be had with—at the same time more satisfactory results—less clashing with the foreign ship masters, and still less confusion resulting. Due economy consistent with efficient management has been exercised in regard to the finances of the Board. It is regretted that the small balance remaining over the yearly running expenses forced the Board this year to abandon the projected quarantine establishments at Key West and Fernandina, the necessity for which, at the points named, has already been referred to.

The watchfulness and aggressive vigilance of the State Health Officer, particularly at the points on the coast the most exposed to the introduction of contagious disease, has given such good results in the past three years in the execution of the Quarantine Maritime Rules that I am encouraged to hope for equally happy results during the coming season.

Respectfully,

W. B. HENDERSON,

President State Board of Health.

Digitized by Google

REPORT OF EX-PRESIDENT R. P. DANIEL, M. D.

JACKSONVILLE, FLA., January 18, 1892.

Governor F. P. Fleming:

SIR—Although that period of the year at which the President of the State Board of Health is required to make his annual report to the Governor has not arrived, yet, in view of the fact that the resignation which I have tendered as a member of the Board is about to take effect, I deem it proper to present to your Excellency, and thereby place on record, a brief summary of such transactions and events relating to the operations of the Health Department of the State as may seem proper, to enable my successor in office to embrace in the next annual report such features of the former as he may deem desirable.

THE GENERAL HEALTH.

The general health of the State during the past year, I am happy to state, has been good, and we have been spared the presence of epidemic disease of any kind. There were several sensational alarms, which the timely and judicious efforts of the State Health Officer promptly arrested and removed.

RELATIONS WITH OTHER BOARDS.

The official relations of this Board with various health authorities beyond our State have been pleasant as well as satisfactory, and there is exhibited a growing confidence in our desire and ability to protect our neighbors, as well as ourselves, against contagious and infectious disease.

COUNTY BOARDS.

Whilst I am pleased to express my high appreciation of the ability as well as cordiality with which many of the County Boards of Health have co-operated with the State Board in carrying out the rules and regulations of the latter, yet I deem it my duty to report some of the former as indifferent and irresponsive.

Digitized by Google

I believe it would promote the financial as well as sanitary interest of the people of this State to abolish County Boards of Health entirely, and to legally authorize the State Board to appoint and pay such local health inspectors as might appear needful. Certainly this is the only method by which any data can be collected sufficiently full and reliable to possess value in formulating vital statistic returns for our State; and such statistics, if comprehensive and exact, would, without doubt, demonstrate the healthfulness of Florida, and indirectly promote her interests and materially aid in her development.

MEETINGS.

There have been held three meetings of the Board since the last annual report was made, viz.: July 21, 1891, at the request of the Hon. W. K. Hyer, for the purpose of revising section 3, maritime and medical inspection of the rules and regulations; October 27, 1891, at Mullet Key, to examine the Station prior to the close of the quarantine season, and to consider certain changes and additions to this Station, suggested by the State Health Officer; and at Jacksonville, January 12, 1892, to consider bids for ballast crib at Mullet Key, and for erection of a fumigating station and disinfecting plant at Key West.

INSPECTORS.

There have been employed by the Board of Health Office during the past year four inspectors. Two of these were temporary, for the quarantine season only, and two are permanent. These lattter, it has appeared advisable, to continue on duty the year round owing to the amount of intercourse with infected or suspicious localities during the winter months, which is had at the points where they are stationed, and I believe that there are several other points in the State which it would be wise to guard by similar permanent inspection service.

QUARANTINE STATIONS.

The quarantine and disinfection station at Mullet Key, which —erected during the previous year—was put in operation at the commencement of the quarantine season of 1891, has worked with a success beyond our expectations, and, as you may observe from the statement herewith transmitted, was very

Digitized by Google

nearly self-supporting during its first year. It had been our calculation that a station similar in character and adapted in capacity to the requirements of that port should have been by this time in course of construction at or near Key West; but the Board at its last meeting, after considering the report in regard to this matter which was laid before it by the State Health Officer, deemed it unadvisable to authorize such large additional outlay at present, particularly in view of the fact that the United States Marine Hospital Department has in course of construction a disinfecting plant at Dry Tortugas, some sixty miles distant from Key West, and this will probably be ready for utilization by the next quarantine season. This, it is hoped, will relieve the situation sufficiently until further steps can be taken in this direction, if found necessary, by the State Board.

The ports on the east coast of the State have relied upon the Government refuge station at Sapelo for such emergencies as have thus far arisen; but as this station is not equipped in such manner as to make it altogether satisfactory, I trust that either a complete outfit for fumigating and disinfecting will very soon be erected at Sapelo by the United States Government, or that the health authorities of Florida may be able and will deem it advisable to provide a station at some suitable point for the use of the ports above referred to.

I have refrained from making a more extended report at this time in view of the fact that the State Health Officer will shortly compile an ample and detailed statement of the operations of the Board in relation to its executive department, and I hope that what is here presented for consideration may meet your approbation.

I am, very respectfully yours,

R. P. DANIEL, M. D.,
President State Board of Health.

Digitized by Google

HEALTH OFFICER'S REPORT.

JACKSONVILLE, FLA., May 2, 1892.

To the Honorable President and Members of the State Board of Health of Florida:

GENTLEMEN—In presenting the third annual report of the work of the executive office of the State Board of Health, occasion is given to congratulate the Board upon the success of its labors for the past three years. That no epidemics or panics have occurred and consequent derangement of business relations, is due to the maintenance of the policy adopted by the Board at its organization.

The personnel of the Board has been changed since its last annual meeting in the resignations of the President, Dr. R. P. Daniel, of Jacksonville, and Hon. W. K. Hyer, of Pensacola, in January last. As the relations between the members have always been of the most pleasant and harmonious character, it is evident that pressure of other and personal business made it difficult for these gentlemen to devote the time and attention to the work which its importance demanded. The Governor filled the vacancies by the appointment of Hon. J. P. Taliaferro, of Jacksonville, and Dr. W. E. Anderson, of Pensacola. At a meeting of the Board held February 15, 1892, for the purpose of re-organization, Hon. W. B. Henderson, of Tampa, was elected President of the Board, and the policy of the former Board confirmed in its rules and regulations.

GENERAL HEALTH.

The general health of the State during the past year has been fairly good, and, as remarked in former reports, it is confidently believed that had more attention been paid by the public to the minor matters of hygiene and sanitation the mortality would have been greatly lessened from what is known as the preventable diseases. The Texas *Health Journal* aptly puts it in saying:

History shows that by cleanliness epidemics may be checked, many of them at least; that police regulations, disinfection

Digitized by Google

and isolation are potential factors in stamping out the invasion of epidemic diseases—all this, too, without the least regard to the relative position of "Jupiter and Saturn." This is what should be fastened on the public. Let all theories of epidemics go. Get clean and remain clean; see that over-crowding is avoided, that streets are cleaned, that back alleys and cellars are dry and clean; disinfect privy vaults and all questionable places. These matters well attended to and epidemics will at least lose one of their favorite foods—filth.

There has been a remarkable decrease in the prevalence of "suspicious rumors", during the past three years, and for the year just ended the State Board of Health has had but two occasions to make an investigation.

In April last a request was received from the Health Officer of Alabama for information in regard to the health of Tampa, as it had been reported to him that a suspicious fever prevailed there. A thorough investigation decided the falsity of the rumor, and traced the source and origin to New Orleans. The correspondence in this case is appended.

In August, 1891, the President of the Board was informed of the existence of a case of fever, with suspicious symptoms, at St. Luke's Hospital in the City of Jacksonville. The patient died, and the post-mortem held confirmed a diagnosis, made before death, of *malarial pernicious fever.*

YELLOW FEVER.

On November 3d the City Health Officer of Jacksonville informed the President of the State Board of Health of a case of yellow fever in the practice of Dr. Neal Mitchell. The patient was promptly removed to the Sand Hills Hospital, five miles from the city, and there treated until recovery. After proper disinfection of effects he was discharged. The history of this case is interesting in that the young man came direct from Bluefields, Nicaragua, on steamship "Whitney" to New Orleans, and landed at this last port in a healthy condition on November 1st (so reported by the President of the Louisiana Board of Health) and passed the quarantine inspection there. He left Bluefields on October 26th and New Orleans November 1st, reaching Jacksonville, sick, on the evening of Novem-

Digitized by Google

ber 2d. The county health authorities were notified of this case by a confidential letter, and whilst there was no attempt at concealment of the facts, at the same time no undue publicity or sensational reports became current. The isolation of the case was perfected by the city authorities without the intervention of the State Board of Health, an action which is commendable and deserving of much credit. A companion of this patient from Bluefields was traced to Lake Worth, where he was reported by Dr. R. B. Potter, the attending physician, who is also the president of the Dade County Board of Health, to have had a sharp attack of "malarial bilious fever." No disastrous results followed either of these cases.

On October 15, 1891, Dr. J. L. Horsey, the Assistant State Health Officer and Port Physician at Fernandina, reported the German bark "Soli Deo Gloria" ashore on the north end of Amelia Island with a crew suspected of being infected with yellow fever. On the same date Dr. C. W. Johnson, of Jacksonville, who had been on a fishing cruise near Talbot Island, informed the State Health Officer that this crew had landed on Talbot Island with all their effects, and that the captain and one man were, according to his understanding of symptoms, evidently convalescing from yellow fever. Transportation was immediately procured, and the State Health Officer, with Dr. Johnson, proceeded to Talbot Island, where the crew, seven sailors and the captain, were found being cared for by some negroes living there. Close questioning of the captain and mate developed the information that the "Soli Deo Gloria" had sailed from Kingston, Jamaica, September 19th with eleven men; three were lost at sea from what the captain called "sunstroke," but which evidence confirmed as yellow fever. Information received about the same time from the United States Consul at Kingston stated that the ballast in the "Soli Deo Gloria" was transferred from the German bark "Elene," last from Rio Janeiro, on board of which a seaman died five days out, and the captain was sick on arrival at Kingston and died there on September 11th; evidence being in favor of yellow fever. Accordingly the shipwrecked crew of the "Soli Deo Gloria" were quarantined on the Island until

Digitized by Google

transportation could be sent to take them to the South Atlantic Quarantine Station at Sapelo. The bark became a total wreck and was bought at public sale by the Nassau County Board of Health, and was destroyed by fire.

On July 14th the steamship "Nigretia," from Vera Cruz, arrived at Pensacola Quarantine Station and was immediately inspected. The captain, in answer to usual questions, stated that there was no sickness on his vessel, nor had there been during his stay at Vera Cruz, or on the voyage. No mention was made in the ship's log of any sickness during the time at sea. The following day the Port Physician was called to see some of the crew who were said to be sick with diarrhœa, and also the second engineer, who was complaining. This man exhibited more than suspicious symptoms of yellow fever, and action was taken accordingly. The steamer was quarantined at the extreme end of the quarantine wharf, away from all communication with other ships and the shore. No one visited her except the Port Physician. While at Vera Cruz the "Nigretia" lay in the "Roads" about half a mile from the shore, and it is said that the only parties allowed on shore were the captain and third mate. As soon as it was decided that the sickness was yellow fever, and the vessel could procure coal, she was ordered to the Chandelieur Quarantine Station. The contagion was not communicated to any other vessel at quarantine, and no evil results followed. The correspondence in reference to this case is given in the Appendix.

On December 3d the American schooner "Warren Adams" arrived off Fernandina from Santiago de Cuba, with her captain ill with yellow fever. Assistant State Health Officer Horsey placed the vessel in quarantine and visited the patient until death ensued, when the schooner was sent to Sapelo.

Thus it will be seen that, although having the disease at our doors, the vigilance of the health authorities prevented an entrance into the State.

SMALL POX.

This disease had been quite prevalent the past year throughout the country, especially in Canada and in the neighboring State of Georgia.

Digitized by Google

On April 27, 1891, the Health Officer of Jacksonville reported a supposed case of the disease to the State health authorities, taking all due precautions by isolation and vaccination to prevent general infection. The case terminated favorably without further contagion.

The patient was supposed to have contracted the disease in the southern portion of the State; although investigation failed to prove just how, when or where. The county health authorities were warned in confidential communications.

DIPHTHERIA.

This disease has been more prevalent than during last year, but no general prevalence has resulted from the isolated cases reported throughout the State at various times. Several cases have been reported from time to time in Jacksonville and Pensacola, but the total deaths in the State for the year amount to but four.

TYPHOID FEVER.

The long drought which has prevailed in the State, by lowering potable water in cistern tanks and shallow wells, has had much to do, in fact, has been the chief cause of the increase of cases of Typhoid Fever over the number of last year, but to ascribe the occurrence of all the cases in the State to defective hygiene in special localities would appear to be both unjust and illogical. The Northern press, particularly that of New York, by sensational headlines, and articles as well, has lately endeavored to represent that there existed at the hotels in St. Augustine and Tampa defects in the sanitary arrangement of these hostelries calculated to originate the poison which in turn produces Typhoid Fever. Whether the charges of these papers are the outcome of ignorance of facts or are made through malicious intent to injure those winter resorts, it is evident that to make such sweeping statements that persons arriving at either St. Augustine, Tampa or any other portion of the State from points beyond the State and from the large centers of population, could develop in a day or two residence in the State Typhoid Fever from causes directly attributable to these localities, displays an ignorance

Digitized by Google

of the nature of the disease in question which an intelligent public must reject.

The State Health Officer has made a careful personal examination of the larger hotels in St. Augustine and Tampa, and has no hesitancy in saying that his observations have developed nothing in the sanitary construction or the potable water of these hotels calculated to produce Typhoid Fever or its allied diseases. Therefore, the belief is expressed that in the large majority of the cases the producing cause was imbibed by the individual elsewhere and before arriving in the State. The tourist travel the past winter to St. Augustine and Tampa was unusually large and, it is learned, was principally from the West. Chicago is known to have had a large number of cases of Typhoid Fever during the autumn and winter, due, it is said, to impure lake water from sewerage pollution. Other towns of the West and East have been similarly unfortunate in this respect. Havana, the Mecca of the tourist travel during the winter, has had quite a prevalence of this disease, as may be seen from the report of the United States Sanitary Inspector attached to the Consulate at that point. Is it not possible, and even probable, that many of these pleasure-seekers coming from these points contracted the disease in these points to develop elsewhere later on in their travels? The belief is firmly expressed that with the bettering of the hygiene and sanitary systems of the towns in the State, particularly of the larger cities, by instituting sewerage and sub-soil drainage, the abolishment of tanks for potable water storage, Typhoid Fever will notably decrease in prevalence in Florida, for it has already been noted that a better health prevails than formerly in those places in the State where artesian water from great depth is freely used for domestic purposes and sewerage has taken the place of the midden and bucket system.

VACCINATION.

During the year ending December 31, 1891, ten thousand and four hundred points of vaccine virus were furnished through this office to County Boards of Health and individuals, both of the medical profession and laity. It is indeed

Digitized by Google

gratifying to note that the sentiment against this protective measure has materially lessened in this State, and assistance is proffered by school boards and the principals of both public and private schools, to secure immunity against small pox, by insisting upon the observance of the requirement of the State Board of Health in this respect. Appeals by letter and circular have been freely distributed, and every aid has been employed to keep this necessary measure before the public and before those especially charged by law to enforce its observance. As an early proof of the value of vaccination a correspondent of the *British Medical Journal* writes:

Six black children, the first who had ever been vaccinated at the Island of Reunion, and from whom 5,000 people were vaccinated, were shipped on board the vessel Jeune Caroline, bound for one of the Seychelles Islands to perform quarantine for small pox.

The children were three months on board the ship eating, drinking and sleeping with the sick; during the time of quarantine they were inoculated with the virus taken from the pustules of the diseased passengers, by large incisions made in both arms. From the report made at the time and communicated to the Central Society of Vaccine by the minister of the home department, it was found that, although these six children had slept under the same blankets, and in contact with the pustules of the sick, eating and drinking out the same vessels, and having been inoculated with pus from the patients who ultimately died of the disease, they were all preserved from the contagion and were, during the whole time, in perfect health. The proof and counterproof is one of the most severe tests ever performed and ought to have a marked place in the history of vaccination. The fact of six children having lived in perfect health on board a small pox ship, infected with small pox—six of whom died—twenty to twenty-five others with crusts all over the body, with seven deaths before their arrival at the quarantine station, all packed in a small space between decks, is perhaps the most crucial test ever witnessed of preservation by vaccination.

Again the *Maine Sanitary Inspector*, October, 1891, quotes Dr. Edson, of the New York Board of Health, as saying, concerning the efficacy of vaccination:

During over nine years' service in the health department of New York I have never seen a case of small pox in a person

Digitized by Google

who had been successfully vaccinated within five years, and the number of cases I have seen amount into the hundreds. During that period I have seen only one inspector of contagious diseases contract small pox, and he was the only inspector who disbelieved in vaccination and refused to have it performed on himself.

On the other hand the same journal points out the fearful responsibility assumed by the anti-vaccinationists in this country and mentions one of the leaders, Rev. Ralph Fothergill, of Fall River, Mass., who advised the public to abstain from vaccination. He contracted small pox and died from it, leaving four of his children in his house sick with the same disease.

LEPROSY.

In May last this office was advised of a death from leprosy in the City of Pensacola and of the feeling of apprehension of some of its citizens on that account. A subsequent visit to Pensacola by the State Health Officer failed to confirm the suspicions of other cases, and there have been no other deaths from this disease reported this year. The year previous, owing to sensational reports published in Northern papers respecting this disease at Key West, the State Health Officer of Texas (Dr. Rutherford) placed restrictions on freight and passengers from Key West, and the Mallory Line of steamers from New York to Galveston were forbidden to hold communication with that place. Communications by wire and letter representing the groundlessness of such exaggerated fears, finally induced Dr. Rutherford to remove the embargo he had placed against the cigar industry in Key West. In the last report it was said:

Although the State Board of Health has at no time been officially notified of the existence of leprosy in Key West, yet I do not deny, nor have I any authority for doing so, that cases, isolated in character, have not heretofore prevailed in that place; indeed it would be strange had not isolated cases occurred, in view of the, until very recently, unrestricted and uninspected communication between Key West and Havana and Nassau. Physicians of reliability have told me that leprosy has been treated in Key West by them. They never knew, however, of many cases; certainly not more than six or eight at one time, and of late years, through death, the

Digitized by Google

number has been decreasing. These unfortunates were kept off the public streets, and in no instance was the disease communicated to any other member of the family.

Within the past month my attention has been directed to two cases of leprosy at Key West, a man and a woman, the latter a pauper. The diagnosis of the disease in these cases admits of no doubt, and was confirmed by Drs. Murray, Sweeting and Armona, as well as by the State Health Officer. Both cases are isolated as well as can be done without hospital accommodations and in a segregated colony. The pauper is cared for by the State and the other patient by his family. Both patients are black and came originally from the Bahamas, but resided in Key West several years before the development of the disease.

As leprosy is liable to be found in any city of the State, and as public opinion is very much aroused as to the danger arising from contact with this disease, it becomes the duty of each State, in the absence of any provision by the general government, to segregate the cases and humanely care for these unfortunates, properly secluded from public travel or communication. To accomplish this it is suggested that a hospital or settlement be established on Mullet Key, which is sufficiently large to admit of a settlement of this kind, properly isolated and kept apart from the quarantine establishment already located there. The State Board of Health has a revocable license for this island from the general government, and it appears to be a proper expenditure of public funds for the Board to defend the people of the State from this loathsome disease by the segregation of its victims in the way recommended.

MEETINGS.

In addition to the annual meeting held May 4, 1891, there have been four special meetings of the Board—on July 21st, at Jacksonville, to consider the advisability of amending sections 3 and 4 of Martime Quarantine Rules of the State Board of Health; on October 27th, at Mullet Key, to examine the operations of the station for the season and to determine upon certain improvements suggested by the State Health Officer; on

Digitized by Google

January 12th, at Jacksonville, to consider plans and specifications and bids submitted by the State Health Officer for the construction of a disinfecting plant at Key West and a hospital and ballast crib at the Mullet Key station, and on February 15, 1892, at Jacksonville, to re-organize the Board, caused by the resignations of Dr. Daniel and Mr. Hyer.

VITAL STATISTICS.

Constant and unremitting attention has been given to this subject of health advancement during the past year; in fact a large portion of the correspondence of the office has been devoted to appeals to the physicians of the State to report the number of births and deaths occurring in their practice.

The County Boards of Health have as frequently been urged to make prompt returns, and every effort has been made both with the individual and the Boards to make efficient an important work of the State Board. After three years of effort to acquire vital statistics of the State, it cannot be said that the results have been either encouraging or of much practical benefit; nor can hope for any increased efficiency under the present system of collecting and reporting them be entertained. The Board requires County Boards of Health to collect (except in the larger towns where the City Board of Health generally does the work) the total number of births, marriages and deaths, with the cause of death, from the several towns in the county, and such other information of sanitary interest as can be learned, and forward these returns monthly to the office of the State Board of Health. This is the law, but of the forty five counties in the State not more than eighteen have at one time made monthly reports, and never for consecutive months. Many counties have no County Board of Health. Excuses for failure to render reports in total or in part have invariably been ascribed to want of money to pay intelligent inspectors and collectors, or the omission of physicians to make returns of their cases, particularly births.

Except in the sparsely settled portions of the State (and they are now getting rare) the number and names of the dead with the cause of death can generally be had from the sexton of a cemetery, who is ordinarily prohibited from burying any

Digitized by Google

corpse without permission from the civil authority of a town or county, based on a certificate of death issued by a competent physician or official, but the same system of regulation is not applicable to births; hence if physicians and midwives do not report their cases, this information, which is important for comparison and study, is lost to the State Registrar, and the vital statistics of the State must necessarily be imperfect.

An intelligent compilation of the phenomena of human life contained in a birth, marriage and death enumeration, with the causes of death, constitutes a health history as well as a politico-economic history of a community or State, which will appeal to the careful consideration and study of an intelligent public, both at home and abroad, and will be an invitation to a class of immigrants whose reasoning powers would dictate a search for such special information as regards healthfulness, from a study of these statistics.

Florida invites immigration, and in order to draw a desirable class from outside of the State, clear, reliable and intelligent statistical data is required, and when obtained will be a sure guide to attract the best class of immigrants. This class we invite by our genial climate and by the varied sources of industry and wealth now opening up, but if we would hold out inducements to the dweller of the extreme North or the inhabitants of the Middle States to adopt Florida as a home, it is but just that the fullest evidence of its highest degree of healthfulness is furnished, as well as other information dealing with sanitary matters. It may be said that the State Board of Health is the best immigration bureau for inviting the best material the State can have.

From the study of the birth and death rate of a State or community, the thoughtful student deduces the increase or decrease of the population, with the death rate at certain ages, of the sexes and races, and from these deductions ascertains the causes that operate to shorten life and how possibly to avoid them. From carefully collected statistics covering the deductions of years, tables of life expectancy have been framed, which form the basis of all life insurance. A very important work of the State Board of Health is the collection

Digitized by Google

of vital statistics. It was hoped that the County Boards of Health would take an active interest in collecting statistics of births, marriages and deaths of their respective counties for the State Board for consolidation and publication. In the consummation of this hope it has been greatly disappointed, and experiencing so many mortifying failures in the endeavor to accomplish this most necessary work of sanitation through individuals or bodies not directly responsible to the State Board, better results cannot be expected unless the recommendation, made in the past two annual reports, is approved of and adopted. When the State Board of Health relieves the County Boards of Health from the duty of collecting vital statistical data, and appoints and pays intelligent collectors in each county, men appointed for special fitness and earnest interest in this work, then and then only can reliable and regular reports be had. The expense which this system would incur would be but an investment of so much money which will double itself many times over in the near future, by inviting immigration of a substantial nature, and as an expenditure will be insignificant to the immense benefit to the people of the State in acquiring knowledge of the causes which produce disease, and the necessary measures to be secured to prevent the same.

There has not been as close attention paid to compiling of statistical reports as their value demands. The want of a standard nomenclature is also greatly felt, and attention was directed to this subject in last year's report, and it was hoped that the Medical Association of the State would consider the matter. It is understood that a report was made recommending the adoption by the Association of the Nomenclature of the Royal College of Physicians and Surgeons of England and that copies of this nomenclature were to be published in pamphlet form for gratuitous distribution by the Association. When this is done, the State Board can require that all reports of deaths shall conform to this nomenclature. Some of the embarrassments resulting from defective returns is so clearly put in the "Occidental Medical Series" that a partial repro-

Digitized by Google

duction of the article is very applicable at this time and on this subject:

Statistics in relation to any subject are valuable in proportion to their accuracy and completeness. In the absence of any comprehensive system for the collection and tabulation of vital statistics in the United States the only data available are the reports of the larger cities and towns. From these reports figures are obtainable upon which general conclusions can be based, and it is in the highest degree desirable that the only available statistics should not be rendered worthless by the carelessness or ignorance of compilers. We have been led to these observations by the discovery that glaring errors are unfortunately frequent in the reports of health departments, and a careful investigation of a large number of reports from various cities demonstrates the necessity of calling attention to this subject.

The failure of the last Legislature to provide by law for the registration of vital statistics in the State makes the adoption and enforcement of a recommendation of this nature an imperative necessity, that the rules of the State Board of Health in this respect shall be observed in a thorough manner.

Bulletins of the reports received have been published monthly in a consolidated form. From a study of these partial reports it is found that:

Typhoid fever caused 120 deaths in *ten* counties, from which reports were received during the entire year, having a population of 149,941, making a death rate of .80 per 1,000 of the population.

Consumption caused 262 deaths in the *same counties*, being a death rate of 1.76 per 1,000 of population. Of this number 199 were natives and 63 residents of a few days to a year.

Pneumonia caused 102 deaths, or .67 per 1,000 of the population.

Heart disease caused 85 deaths, or .56 per 1,000 of the population of the same counties.

In the Appendix will be found various statistical tables compiled from the reports received during the year.

Digitized by Google

THE QUARANTINE SERVICE

Has been maintained the past year with close attention to every detail, and to this can be attributed the freedom from importation of epidemic diseases into the State. The Mullet Key quarantine station on the west coast, constructed in 1890, was successfully conducted from May to November, embracing the active quarantine season. Two hundred and fifteen vessels arrived at this station during the summer of 1891, and after inspection were either released or detained for discharge of ballast and disinfection. Two thousand six hundred and twenty passengers and five thousand two hundred and seventy-eight seamen belonging to vessels from infected ports, were thoroughly examined and passed without detention; and the fact that no case of sickness of any kind found entrance into the State through Florida and Havana lines of steamers, is satisfactory evidence of thoroughness in the primary inspection of individuals on departure from Havana, and seems conclusive as to the efficiency of protection in the acclimation certificates required by the State Board of Health in its regulations.

The fees collected at this station was $3,642.50, and $3,-961.03 was expended in maintaining the same. To operate the plant it was found necessary to employ a force of six, including a Physician in Charge.

Owing to the growth of the phosphate industry, increased shipping will demand of this station special work necessary for vessels from infected ports to enable them to enter our ports, and this will produce a revenue which it is thought will, in a few years, render the plant self-supporting and independent of financial help from the State. A ballast crib for the discharge of ballast from infected ports has been ordered built at this station, and will be ready when the active season for operating the plant arrives. The crib will be connected with the island by a tramway, thus securing means to obtain clean ballast to replace the infected, which will be discharged. Another tank for storing fresh water has been ordered, and a hoisting engine will be placed on the ballast crib.

Digitized by Google

Besides the quarantine station at Mullet Key, the State Board of Health has maintained coast inspection at Manatee, Sarasota, Boca Grande and Punta Rassa, through intelligent citizens, by paying them small salaries for this service ; which, except at Boca Grande Pass, has been more of a surveillance than an active work of inspection. On account of the increase of freight and shipping from Punta Gorda and the Charlotte Harbor region, the carriers of which are generally chartered in and arrive from a foreign infected port, it is now thought that the Board should no longer delay placing at this port (Boca Grande) a competent physician of keen discrimination and firmness, to compel an observance of the quarantine rules and regulations of the Board, and measures have already been taken to secure permission from the United States Lighthouse Department to erect a small cottage on Gasparilla Island as a boarding station. This island lies at the entrance to Charlotte Harbor, and is practically occupied by the Lighthouse Department as a light station. A force of three men, including the physician, will be sufficient for the present demands. From this point vessels for Punta Gorda from infected or suspicious ports, or in any way suspected as to their sanitation, can be sent to Mullet Key, sixty miles north, for cleansing and disinfection.

The quarantine and patrol boat, purchased by the Board in 1890, rendered efficient service during the past quarantine season. Being constantly on the move, a supervision was had over the whole of the western coast from Key West to Pensacola. This means of surveillance and inspection has been a valuable part of the quarantine system of the State, and the cost is small as compared with the sense of security and confidence inspired in the public mind that watchfulness in this respect is exercised; and, again, the cost is much below that of the charter of a similar boat for this service every summer. Some changes in the boiler and woodwork have been made during the winter, which were necessary to secure greater speed and better conveniences for the crew. Not having been built for this especial work, it was not to be expected that a boat would be found already built exactly suitable in

Digitized by Google

every detail for this work, but it is thought that for the price originally paid for the boat, $5,000, the bargain was exceptional and that she is an exceedingly cheap boat, with an equal amount spent in alterations and slight repairs. It has been asked by the critics of the State Board of Health, both in the ranks of the general public and by legislators, of what special use this patrol boat has been or will be? It is difficult to answer this query, because as yet no necessity has arisen to transport persons or vessels from infected localities to refuge stations, nor has it been necessary to make seizures but once for the violation of the Maritime Quarantine Rules of the State; but as these emergencies are liable to arise at any time, it is necessary to provide against their occurrence in the matter of health as it is in a business point of view to provide against loss by fire by insurance. While the State guards the main ports of entry through the local boards against invasion of disease by sea, her smaller ports and inlets are more or less exposed, and many parts of the coast thus unprotected would seem to invite the entrance of fevers. This the Board seeks to remedy by means of the coast patrol steamer "Missoe." The charge made by the enemies of the Board, and in the last Legislature, and by some of the press, that the "Missoe" was but a pleasure yacht of the State Health Officer, does that officer and the quarantine system a gross injustice. If any of the hypercritical and captious will cruise in this vessel from May to November, on the west coast of Florida, subjected to cramped space for movement, hot sun, sudden squalls and the armies of insects, it is thought that the decision will speedily be reached that the service is not one of pleasure, nor will it require a season's work to arrive at such a conclusion. The employees of the Board have a right to expect a serviceable and seaworthy vessel in which to perform this duty, and to secure this, and only this, have the public funds been expended.

At a special meeting of the Board at Tampa last October, the State Health Officer submitted the increasing necessity for a disinfecting plant, similar to that at Mullet Key, for the harbor of Key West, and he was at that meeting instructed

Digitized by Google

to locate a site in the harbor, prepare plans and secure bids on the same, and to report to the Board at an early date. At the same meeting he was instructed to procure plans and bids for a hospital building to be erected at Mullet Key, and for a crib for storing ballast coming from infected ports. Accordingly, plans with specifications and bids were submitted at a special meeting held January 12, 1892, when the State Health Officer earnestly advocated the erection of the Disinfection Plant at Key West, and submitted a petition and resolution from the Commissioners of the city of Key West in relation thereto. The action of the Board was as follows: "*Resolved*, That for the present the Board agree that it is impracticable to let the contract for the Station at Key West." The necessity for this work is so apparent that its execution must be effected very shortly, and it is to be hoped that before the end of this year a plant for steam disinfection may be in successful operation at Key West.

The bid for the erection of the hospital building at Mullet Key was accepted and contract awarded to Mr. S. L. Jones, of Tampa, the lowest bidder, for $2,900. Mr. Jones afterwards failed to perfect his contract or furnish bond for the faithful execution of his work. The other bids were rejected by the Board as excessive. Whereupon, President Henderson and the State Health Officer were appointed a committee to contract for the erection at Mullet Key of a hospital building not to cost over $3,500.

The County Boards of Health of counties on the sea coast have rendered during the past season efficient aid in preventing the introduction of epidemic disease into the State. To the prompt action of the Escambia County Board of Health and to its efficient and careful quarantine officer, is due the escape from infection by the steamship "Nigretia," to which reference has already been made.

The Nassau County Board has likewise been on the alert, and has on several occasions prevented vessels with sickness entering the port of Fernandina, by promptly ordering all such objectionable class of shipping to the Government Quarantine Station at Sapelo Sound.

Digitized by Google

In June the Sanitary Inspector at Boca Grande Pass informed the State Board of Health of the arrival of the British bark "Croyden," in ballast from Rio Janeiro, and asked if ballast could be discharged in Charlotte Harbor Bay and a cargo of phosphate taken on board. He was instructed to order the vessel to Mullet Key Station for discharge of ballast and disinfection. The master of the "Croyden" having positively refused to comply with these orders, steps were immediately taken to compel his observance of the law by District Attorney Palmer, of the Sixth Judicial Circuit, and the State Health Officer. An arrest of the captain of the "Croyden" at Punta Gorda promptly brought him to terms, when promising immediately to comply with instructions and securing his promise with reliable bondsmen, the case was dismissed from the Justice's Court, before which it had been brought. Obedience to law resulting, there was no desire to further punish, as the costs in the case were already large enough to probably prevent a repetition of the offense. The bark reported at Mullet Key, discharged her ballast and was disinfected.

A matter worthy of the consideration of the State Board of Health, as well as the next Legislature, in connection with the State Quarantine Service, is the control of the local quarantines by the State Board. The law charges the State Board with the responsibility, and the general public holds it directly responsible, that no epidemic or contagious disease should be imported. The division of authority with the County Boards in this respect must necessarily result in the impairment of the efficiency in administration. However efficient the officials of the local Boards may be, they are nevertheless in a great measure independent of the State Board by not being directly responsible to the Board for their positions or for their acts, and thus the State Board is incapable of performing a duty for which it is held responsible. The position of the State Health Officer has from the inception of the State Board been stated on this point, and need not therefore be repeated. In urging the adoption of a uniform set of regulations for all ports in the State, there is no desire, more than is absolutely

Digitized by Google

necessary for the general health of the State, to interfere with local self-goverment. It is plain that uniform requirements at all the ports must be maintained and supervision of the State Board of Health over the County Boards is vital to secure this end.

HEALTH BOARDS AND ORGANIZATIONS.

Under the general law for the incorporation of cities and towns in Florida each municipality is granted authority to provide by ordinance for the health and police protection of its citizens. This has been generally adopted in the larger towns, and in some of the special charters granted to several of these larger cities the powers and duties of these Boards of Health have been made more comprehensive than the authority conferred in the general law. Jacksonville has a health department composed of the Mayor, Chairman of the Board of Public Works, and three members of the Municipal Council; and the executive department comprises a City Health Officer, with assistants and a corps of sanitary patrolmen and inspectors. The work done by this Board is excellent in the details of execution, and the statistical data furnished the State Board of Health is interesting and valuable, showing patient search and careful preparation. Pensacola divides the duties of health surveillance with the Escambia County Board of Health, which collects the vital statistics of the City of Pensacola, as well as that of the county of Escambia. This Board is vigilant, active and thoroughly alive and appreciative of the responsibilities devolving upon them under the law. Tampa has recently created a Sanitation Department, with a Chief of Sanitation in whose hands the whole health protection of the city is placed. The system has not been in operation long enough, as yet, to pass comparison upon its merits. Key West has a health department consisting of the Mayor, the Board of Councilmen and the City Health Officer. The ordinance creating this department is full and comprehensive, embracing all measures necessary to keep the city in a thorough sanitary condition, with the least possible cost and with the greatest possible efficiency. The vital statistics are furnished by the

Digitized by Google

City Health Officer. The only thing lacking is the thorough enforcement of the health ordinances.

In 1881 the Legislature of Florida enacted that in towns having over three hundred inhabitants Boards of Health could be established, consisting of the Mayor of the city, the chairman of the Board of County Commissioners, as *ex officio* member, the City Health Officer and four members of the City Council. In 1885 this law was substituted by one creating County Boards of Health. The provisions of the law were faulty, as it imposed heavy penalties for minor infractions of health ordinances and made the offender, upon conviction, a felon and a disenfranchised citizen. Besides, to effect punishment for the violation of the rules of the Board, the making of which the law authorized, a tedious process had to be gone through with of preliminary hearing before Justice of the Peace and giving of bond for appearance before the next Circuit Court. "The law's delay" in these cases invariably resulted in the failure to convict. In 1889 the Legislature again amended the law for County Boards of Health by substituting a new enactment, which reduced the membership to three, provided for a fair salary to the secretary, and a per diem and mileage to members when in attendance of meetings. Violations of health laws were made misdemeanors and therefore promptly punishable. Ample authority was granted to abate nuisances prejudicial to the public health, to prevent the introduction of contagious and infectious diseases into the county, and to properly isolate and care for any cases arising in the county before the appearance of the State Health Officer; and also provided for the collection of vital statistics. It was thought that this law would meet all necessary requirements to enforce domestic hygiene and sanitation, and that boards constituted thereby, being clothed with ample authority and provided with sufficient funds (a one mill tax), would take a laudable interest in preserving the health advantages of the several sections of the State which would be under their immediate surveillance, and thereby be valuable gatherers of the information which the State Board of Health expected to formulate and distribute.

Digitized by Google

In 1891 the Legislature again amended this law, striking out an ambiguous sentence in the provision of the act giving discretionary power to the County Commissioners to levy the one mill tax for the support of the County Boards and substituting a mandatory requirement to do so on the request of the County Boards; and also requiring on the part of the said Boards a yearly report of the Boards' receipts and expenditures.

A brief synopsis of the health legislation of the past dozen years is given in order that it may be seen that there has been no want of desire on the part of the legislators to give to the County Boards of Health an abundance of authority and means to protect the health of the citizens immediately under their care. Before the creation of the State Board of Health in 1889 the County Boards of Health were clothed with arbitrary authority to make rules and declare quarantines whenever they deemed it expedient, and it is but necessary to call to remembrance the year 1888 to fully realize the terrors created and inhuman acts committed through a false idea of duty to the public in the exercise of this arbitrary authority. The Boards were amenable to no higher authority in health matters, for none existed, and it was but natural, perhaps, when the State Board of Health completed its organization and published its rules restricting the County Boards in some of its acts, that the County Boards should reluctantly accept the abridgement of authority, and may have felt some resentment on account of what they might consider an interference with their privileges; hence immediately excuses were made for not complying with the State Board's requirements in regard to house to house inspection and to the collecting of vital statistical data. At first the excuse for not performing the duties in the above respects was "no funds," and when the way to obtain funds was pointed out, by a request at the proper time on the County Commissioners, this was met that the Secretary of the Board was not paid to do this work. In fact the Secretary of the Board of one of the most prosperous counties on the eastern coast has repeatedly written, "Our Board has manifested a decided unwillingness to compensate me for my time and trouble in these cases and others. The

Digitized by Google

law permits the County Boards to allow such additional compensation to the per diem and mileage as fixed to Secretaries and Treasurers as may be fair and right. As it is, I fear that vital statistics will be a dead letter in this county soon. It seems to me you are putting the County Secretaries to some work which properly belongs to the State Bookkeeper in consolidation and classification. One-half of our M. D.'s will not report; they take no interest in these matters, because they get no pay."

With two or three exceptions, the County Boards of Health cannot, either for lack of funds denied them by the County Commissioners, or from apathy and indifference will not manifest that interest in the subject of health protection and vital statistics which is their duty under the law. Excuses of one kind or another are so often made for the absence of returns, or for imperfectly filled out blanks, that the State Board dispairs of ever obtaining valuable vital statistics through the County Boards. For three years the experiment has been tried to have the County Boards the collectors of all sanitary information, including vital statistics in the county, and to furnish the same to the State Board of Health. Blanks and postal cards were gratuitously distributed, and had it been asked for, postage stamps would also have been furnished to lessen as much as possible the cost of reporting the information, but the experiment has failed because the majority of the County Boards have not taken sufficient interest in the matter.

When the State was unprovided with a central health authority to guard against epidemics or to manage isolated cases of epidemic diseases when they occurred, it was necessary that some method should prevail to care for these special emergencies, and it was demanded that its citizens should devote gratuitously their services in this direction; but after the organization of the State Board, with funds for health protection, it was not to be expected that valuable time and effort would be given at the expense of private interests in a work that it was impossible to adequately recompense a body of citizens for performing. This is especially true in regard to

Digitized by Google

the medical men of the State. They cannot be expected to devote the necessary time and attention to the details of the work of Boards of Health without adequate compensation. Those who are actively engaged in the practice of their profession have their time constantly occupied in the study of cases and in faithful attendance upon patients. The trend of their thought is purely medical, and however strong the inclination to consider collaterals of medical science, they lack the time to do so, yet the medical member of the County Board is expected to be the Vital Statistician and the Sanitist of the Board, and to be at all times thoroughly acquainted with the causes of preventable diseases occurring in the county and cognizant of every cesspool or sanitary nuisance in his town; and this knowledge he is expected to possess irrespective of the fact that he is perhaps the busiest man in the community. His time is not his own, day or night, and he is debarred from setting apart a day or an hour for special study or the tabulation of facts. The medical man is generally selected as the Secretary, and the whole work of the Board, as a rule, devolves upon him. It is evident that medical men are pre-eminently qualified for this work of health protection by reason of their preliminary training and their constant study of disease, and it is well said that there is no class of citizens more generous in imparting their knowledge, if properly approached, and willing to furnish the statistics of births and deaths occurring in their practice with local sanitary data which is so much desired.

It is both proper and right that those of the medical profession who are financially able to do so, should devote their attion in this direction, as statisticians; but the practitioner, with his extensive range of country practice, or the city physician, with his visiting list full of serious cases, has not the time to devote to sanitary work. Therefore it would seem both just and necessary to relieve the County Boards of Health of the duty of collecting vital statistics, and for the State Board of Health, by intelligent collectors, to pay for the special information necessary to be procured outside of the larger towns.

Digitized by Google

FINANCES.

Up to the end of the year, April 30th, there has been expended the sum of $74,987.15, and of this amount $23,175.87 has been disbursed during the past year. The Legislature of 1889 appropriated $50,000 for the use of the Board for that year and provided for an annual levy of one-half mill in succeeding years to create a health fund which should be at the disposal of the State Board of Health. Through some error or misunderstanding the levy of this tax was not ordered by the Comptroller for 1890. In 1890 a levy was made for the following year, of the full amount allowed by law, but in 1891 the Governor, under the discretionary power permitted him, cut down the levy to one-quarter of a mill, deeming that amount sufficient for the needs of the Board. It will thus be seen that the total amount of money made available to the Board has been about $92,000, and that $74,987.15 of this amount has been expended, for which, in addition to the protection afforded to the State and confidence inspired, the Board has a valuable disinfecting plant and a serviceable quarantine boat.

The executive officer of the Board believes that he has been as economical of the public funds as was consistent with efficient management. No money had been spent not duly authorized by the Board as demanded by or in connection with the sanitary necessities of the State. The endeavor to manage the Health Department of the State on a merely cheap plan promises defeat of the very objects sought for, the confidence of the people and the success which justifies it. It is believed that the people of Florida, the business men, the investors and all others interested in the financial development of the State dread a return of the situation which led to the loss of life and depression in trade during the years 1887 and 1888, and are now satisfied that an intelligent management of health matters through a central organization, such as the State Board of Health, has accomplished great and lasting good to the State; but the people must realize that to continue this work and to perfect it each year, requires substantial aid in the way of liberal appropriations. If it is not intended to do this, but to

Digitized by Google

have a State Board of Health in name only, it would be better and more honest to our neighboring States and the country in general, to repeal the law, for in that case there would be no pretense of doing what without means it is impossible to accomplish. A statement of receipts and expenditures is affixed to this report.

LEGISLATION.

It was sought at the last session of the State Legislature to amend the law creating the State Board of Health, in order that it might become still more efficient. The recommendations of the President of the Board and of the State Health Officer were transmitted by the Governor to the Legislature and attention invited thereto. It was asked to have the date of annual meeting changed from May to January; to increase the membership of the Board by the addition of the Governor of the State and the State Health Officer, as *ex officio* members; to alter the manner of inspections by the State Health Officer; to give surveillance to the Board, through its executive officer, over all sanitary defects in cities and towns, whether calculated to promote the spread of epidemic disease or to cause diseases that are known to be preventable, by prompt and compulsory abatement of such evils; and lastly, to provide a system of registration of vital statistics. Patient and persistent endeavors of the State Health Officer and friends of the measures to actively interest the members of the House and Senate Public Health Committees were unfortunately unsuccessful, and the session closed without any action being taken by either House. A bill for the Registration of Vital Statistics, introduced by the Hon. F. T. Myers, in the Senate, passed that body, but failed in the House. Legislation adverse to the interests of the State Board of Health was advocated by introducing amendments to the law, apparently harmless on the face, which, if adopted, would have seriously impaired the efficiency of the Board in enforcing an observance of its rules and regulations, which was, however, defeated by a handsome majority, thus demonstrating that the Legislature as a body was opposed to lessening the efficiency of the law governing the State Board of Health. No additional appropriation was

Digitized by Google

asked for, or any additional authority of power, but measures rather to perfect the Act of 1889.

The several bills that were proposed with those that were introduced are appended for general information.

OFFICE WORK.

The correspondence of the office has steadily increased in the past three years. In 1890 the number of letters received and answered was 1,275 received and 1,878 written. In 1891, the past year, this number was increased by 119 written, making a total of 1,997 for the year. Besides this correspondence, many circulars have been issued and the monthly bulletins of vital statistics; all of which required time and patient labor. This has been done with the assistance of one clerk, Mr. F. B. Matthews, whose fitness for this special service and whose business capacity and interest has compassed many difficulties in connection therewith. The multifarious duties of the State Health Officer, requiring his presence in different sections of the State, has taken him much away from the office of the Board, of which the statute makes him the Secretary, and therefore the routine work has been left in a great measure to the execution of Mr. Matthews. To appreciate that it has been well and carefully attended to, a visit to the office of the Board at Jacksonville and an examination of the records will be amply convincing.

RECOMMENDATIONS.

The suggestions made in last year's report as essential in the way of legislation to increase the efficiency of the Board, are again renewed and to be urged upon the attention of the next Legislature. In addition to these it is further recommended:

First. That disinfecting plants be erected in the harbors of Key West and Fernandina. The necessity for these plants at the points named is imperative, the former being almost outside of the entrance to Havana, and the latter fast becoming a large shipping port of phosphate and lumber to foreign ports, these commodities being mainly carried in vessels chartered in foreign ports, principally the West Indies. To the query which is often asked, why the Government Quarantine Sta-

Digitized by Google

tions at Dry Tortugas and Sapelo Sound are not available for these ports respectively, the answer is that the State does not propose to treat Yellow Fever, Small Pox or Cholera on shipboard in her harbors or ports; that the State Disinfecting Station at Mullet Key and the one at Pensacola are for making clean and rendering safe suspicious vessels from suspicious ports during the summer season, while vessels arriving at any port in the State with the contagious diseases just enumerated will be sent to the Government refuge or quarantine stations for detention and treatment of their sick, except where it is impossible for a vessel to proceed by reason of want of crew or other disability.

Second. It is also recommended that a Boarding Station, consisting of a cottage and necessary outbuildings, be erected at Boca Grande Pass, where the number and character of the shipping has so increased in the past two years as to now demand the surveillance of a competent physician.

Third. It is advised that a settlement of small one-story buildings be established at Mullet Key for the care of lepers that may be found in the State. The houses could be increased in number as required. For the present two only will be necessary. The services of the physician in charge of the Disinfecting Station at Mullet Key, who is a capable and efficient officer in addition to his other duties, can be had for the medical care of this unfortunate class.

CONCLUSION.

The past year has been one of great anxiety to the Executive Officer of the Board, in fully realizing that as the danger from the introduction of Yellow Fever increases along with the increase in commerce between the State and the ports of South America and the West Indies, so much the more vigilant, even aggressive, must be the measures resorted to to protect the citizens of the State therefrom. The trading instinct of mankind will seldom brook without resentment interference with personal interests, and not until sickness or death stares him in the face is the average citizen apt to realize that the laws enforcing domestic hygiene and for prevention by

Digitized by Google

quarantine are to promote alike his life and his business, with the least possible intrusion upon his rights and liberties.

In the execution of the health laws of the Board the State Health Officer desires to testify to the confidence reposed in him and to the support afforded him at all times by the Board as a body and by its individual members. The ex-president and the present presiding officer have given such flattering assurances of their trust, that the work, though laborious and full of anxiety, has been thereby much lightened, and an incentive to continued effort results from the hearty approval of the Board.

JOSEPH Y. PORTER.
Secretary and State Health Officer.

Digitized by Google

Digitized by Google

APPENDIX.

Digitized by Google

Digitized by Google

FINANCES.

STATEMENT OF EXPENDITURES SINCE ORGANIZATION OF BOARD.

Disbursements from May, 1889, to April 30, 1890, being the first fiscal year of the State Board of Health	$11,405 25
Disbursements from May 1, 1890, to April 30, 1891, being the second fiscal year of the Board	40,406 03
Disbursements from May 1, 1891, to April 30, 1892, being the third fiscal year of the Board	23,175 87
Total Expenditures since organization	74,987 15

ITEMIZED AS FOLLOWS:

	1889.	1890.	1891.	Total.
Per diem and mileage expenses of members	$ 1,361 60	$ 481 20	$ 661 40	$ 2,504 20
State Health Officer's salary	3,056 47	3,000 00	3,000 00	9,056 47
State Health Officer's traveling expenses	707 70	805 70	926 83	2,440 23
Clerical assistance	1,047 09	927 50	1,065 00	3,039 59
Attorneys' retainers	403 97	306 85	364 60	1,075 42
Inspectors' salaries	1,442 01	1,894 56	1,442 50	4 779 07
Office rent	260 00	295 00	240 00	795 00
Office furniture	325 65	77 77	76 00	479 42
General office expenses	187 01	296 76	202 01	685 78
Printing and stationery	614 63	624 20	468 45	1,707 27
Printing annual reports	.....	265 00	.....	265 00
Official telegrams	137 99	66 67	74 88	279 54
Yellow Fever cases, Sanford	935 78			935 78
Purchase of steamer Missoe	.....	5,000 00	.....	5,000 00
Alterations to Missoe	.....	1,028 46	3,223 17	4,251 63
Maintaining steamer Missoe	.....	1,926 12	5,496 41	7,422 53
Yellow Fever at Key West	764 21	.....	.....	764 21
Station at Port Tampa	27 35	.....	.....	27 35
President's trip to Charleston	28 30	.....	.....	28 30
Packing camp equipage	.....	11 15	.....	11 15
Dr. C. J. Burrough's trip to St. Augustine	.....	18 70	.....	18 76
Draughting plans	60 00	.....	139 00	199 00
Boat hire	28 00	310 00	20 00	358 00
Erecting Mullet Key Station	.....	21,687 87	.....	21,687 87
Salary of supervisor	.....	908 33	.....	908 33
Maintaining Mullet Key	.....	464 19	3,961 03	4,425 22
Additions to Mullet Key	.....	.....	379 89	379 89
Insurance	.....	.....	337 25	337 25
Interest on money	.....	.....	224 48	224 48
Case "Soli Deo Gloria"	.....	.....	593 02	593 02
Telephone	.....	.....	55 78	55 78
Office safe	.....	.....	194 22	194 22
Case of Leprosy at Key West	.....	.....	30 00	30 00
Miscellaneous	17 50	10 00	.....	27 50
Totals	$11,405 25	$40,406 03	$23,175 87	$74,987 15

STATEMENT

OF INSPECTION AMD DISINFECTION FEES COLLECTED.

Disinfection fees received in 1889 at Port Tampa	$ 201.50
Disinfection fees received in 1890 at Port Tampa	69.25
Inspection and disinfection fees received at Mullet Key, 1891	3,612.50
Inspection fees collected at Punta Gorda, 1891	25.00
Inspection fees collected at Braidentown Station, 1891	5 00
Total quarantine fees collected by Board to April 30, 1892	3,943.25

Digitized by Google

CORRESPONDENCE IN REGARD TO RUMOR OF YELLOW FEVER AT TAMPA IN MARCH, 1891.

MONTGOMERY, ALA., March 31, 1891.

Dr. R. P. Daniel, Jacksonville, Fla.:

DEAR DOCTOR—A rumor reaches me through a gentleman coming from New Orleans that there is a suspicious type of fever prevailing in Tampa. Of course I know that if you had any knowledge of yellow fever there you would give me prompt information of it, but you will understand also that I am expected to inquire into all rumors of evil omen.

Please, therefore, my dear Doctor, let me know if there is any foundation in fact for the rumor referred to, and oblige

Yours truly,

(Signed) JEROME C. COCHRAN, M. D.,
State Health Officer.

TAMPA, FLA., April 3, 1891.

Dr. R. P. Daniel, President State Board of Health, Jacksonville, Fla.:

DEAR SIR—I am prepared to state positively that there is no sickness here of a suspicious character, nor has there been any.

Our city is especially healthy; there being very little sickness of any kind. Yours very truly,

(Signed) LESLIE W. WEEDON, M. D.,
Health Officer for Hillsborough County.

JACKSONVILLE, FLA., April 4, 1891.

Dr. Jerome Cochran, State Health Officer, Montgomery, Ala.:

MY DEAR DOCTOR—Your letter of the 31st of March was duly received, but I have delayed replying to it until I could communicate with the Health Officer of Tampa.

Your own reason for writing me in relation to the information furnished you by the "gentleman coming from New Orleans" will enable you to understand why I have taken this course.

Dr. Porter is in Key West; matters of family interest carried him there last Monday and he will, I expect, return here on Monday next.

Although thoroughly satisfied that there was not a shadow of an excuse for such a report, and that the malice of the

Digitized by Google

slander had not even plausibility to sustain it, nevertheless, I wired and wrote at once to Mr. Henderson, one of my colleagues on the State Board of Health, who resides at Tampa, and sent him a copy of your letter. I have to-day received an official communication from Dr. Leslie Weedon, Health Officer of Tampa, in relation to this, and herewith forward you a copy of the same. I thoroughly endorse his official statement as being reliable.

In conclusion, let me thank you, my dear Doctor, for the confidence expressed in my good faith towards you and, I hope, towards everyone else, and let me additionally express my obligations for referring this matter to me for verification.

Believe me yours very truly,

(Signed) R. P. DANIEL, M. D.,
President State Board of Health.

CORRESPONDENCE IN CASE OF S. S. "NIGRETIA."

PENSACOLA, FLA., July 16, 1891.

Dr. R. P. Daniel, President State Board of Health, Jacksonville, Fla.:

DEAR SIR—Since writing this A. M. Dr. White has advised Dr. Hargis that he has on board the steamship "Nigretia" a suspicious case of fever, and that you may fully understand the whole case with all attendant circumstances, I hand herewith a copy (verbatim) of Dr. White's report. Dr. White has been instructed to put the steamship into the stream to await developments, and, should the suspicions be confirmed, ship will be sent to Chandelieur Island Station.

I do not wire you for prudential reasons, especially as the suspicion is at the quarantine station and no present danger threatens the town. Should the case terminate fatally with fully developed symptoms, I will telegraph you thus: "Confirmed."

I also hand a copy of letter from captain of steamship to Dr. White.

Yours very truly,

(Signed) WM. K. HYER.

(Copy of Dr. White's report enclosed in above letter.)

LEONARD STATION, July 16, 1891.

R. W. Hargis, M. D., President of Board of Health, Pensacola, Fla.:

DEAR SIR—The British steamship "Nigretia" from Vera Cruz arrived at quarantine the 14th instant, 8:30 A. M. Was

Digitized by Google

visited almost immediately on arrival. The captain in answer to the usual questions stated that there was no sickness on his vessel, nor had there been during his stay at Vera Cruz, nor on the voyage.

No mention is made in the official or mate's log of any sickness during the time.

On the 15th, at 10 A. M., I was called to see some of the men said to be sick with diarrhœa and dysentery, also to see second engineer. I examined the donkey-man; found him without fever, complaining of diarrhæa; prescribed for him; saw him this A. M.; says he still has diarrhæa; gave him medicine.

Seaman Monroe took sick the 14th, at night. Found him with slight fever; obstinate constipation; considerable tenderness over the stomach; prescribed for him. Bowels not moved when I visited him this A. M. Much tenderness over the stomach.

Rowan, the second engineer, complained of not feeling well the day after leaving Vera Cruz; has been up and down since; was on deck the morning the vessel arrived here and was not reported sick. I found him with head and back ache, pains in all his joints; as he said, "Pains all over." Tongue coated in center, moist with redness of edges. Gums swollen and red. Uneasiness of stomach. Vomiting with retching; much distress; skin dry; eyes slightly injected; urine turbid and highly albuminous; has passed 14 ounces since my first visit; none since 12 M. last night; tested each discharge; all highly albuminous; passed a restless night; 1 A. M., had slight spasm; quiet when I visited him this morning; says he feels better. I enclose statement of temperature and pulse.

The vessel laid one-half mile from Vera Cruz in roads. The second engineer was not on shore; the captain and third mate were. All vessels are in stream. The steamer is at the extreme east end of wharf. No one has been ashore from her, and no communication whatever, save myself and Mr. Buckinham, who has been aboard three or four times.

I think the symptoms indicate more than suspicions of yellow fever.

(Signed) R. C. WHITE,
P. S. Inspector.

Digitized by Google

CIRCULAR LETTER.

JACKSONVILLE, FLA., December 19, 1891.

To all Superintendents of Public Instruction and Principals of Schools in the State of Florida:

DEAR SIRS—The State Board of Health of Florida requests your careful and earnest consideration of the subject of vaccination as a preventive of smallpox, which disease is now prevalent throughout the entire United States, Canada and Central America, and is ever a source of danger from the Island of Cuba.

Situated as Florida is, and having annually such a large influx of visitors from all parts of the country, and particularly from those more northern States, where this disease is a constant menace, it is absolutely necessary that the State Board of Health of Florida should urge upon those of its citizens who are unprotected the necessity for vaccination.

We admit that the people have to be educated in these matters by slow and laborious processes, and we rely very much upon your co-operation to promote this much to be desired end. A large majority of the citizens accept cheerfully and even gladly the protection afforded them by vaccination.

Now is the time for us to insist upon the reasonable enforcement of this part of the rules and regulations of the State Board of Health. We would have you who are so deeply interested in educational matters to understand that we do not wish to appear unreasonable or opposed to the important interests which you have in charge; on the contrary it is our desire to assist and promote those interests, and in no better way can we show our appreciation of the trust reposed in us than by insisting on vaccination.

Should a single case of smallpox be discovered (and it may occur at any time) in or near your city, and the disease become prevalent, your school would be completely broken up, unless this regulation had been fully complied with, it being a recognized fact that nothing is so conducive to the propagation of disease as the gathering together of individuals in schools, churches, factories, etc.

If the principals of schools would only give this matter their attention and co-operate with the health authorities, much of the opposition to vaccination among a certain element would be overcome. There is no occasion for any annoyance to teachers or pupils, and there will be no friction whatever if the teachers will only explain the necessity for this precaution in

Digitized by Google

a kindly way, letting those unprotected understand just how and where they can be vaccinated and the benefits that each will derive therefrom. If this is done and the matter dealt with in kindness as well as firmness there will be but very little opposition.

A few years ago countless graves, scarred faces and sightless eyes bore grim evidence of the power of this most loathsome disease. To-day, thanks to vaccination, epidemics of smallpox are neither so frequent nor so virulent, and the blind orbs and pock-marked faces are growing comparatively rare.

As a proof of the beneficent results of vaccination it is only necessary to note that in Holland between 1870 and 1873 there were 20,575 deaths caused by smallpox. A stringent law was enacted making vaccination compulsory, with the result that smallpox mortality has steadily diminished from year to year. During 1890 only one death is reported as occurring in Holland from that disease. In Germany vaccination is compulsory; in France it is not. In Germany the total mortality in the entire country from smallpox was 168. In Paris alone during the same year it was 382. In Alsace the annual mortality per 100,000 from smallpox has fallen, since the annexation of that province to Germany, from 2.14 to 0.22. The citizens of Zurich voted to do away with compulsory vaccination in 1883. The number of deaths in 1882 was 3; in 1883, 8; in 1885, 52, and in 1886, 85.

During the past year over ten thousand people have been vaccinated in this State. Can it be denied that we, as a people, are better protected from smallpox than we were a year ago? Therefore, let me urge upon you the necessity for giving this important matter your serious attention.

Yours truly,

JOSEPH Y. PORTER,

State Health Officer of Florida.

Digitized by Google

SENATE BILL No. 196.

A BILL to be entitled An Act to Create and Establish a State Bureau of Vital Statistics for the State of Florida and to increase the Efficiency of the State Board of Health.

Be it enacted by the Legislature of the State of Florida:

SECTION 1. The State Board of Health of Florida shall collect and compile accurate vital statistics of the marriages, births and deaths of residents and non-residents of the State, arranged by counties and incorporated cities, with reliable statements of the prevailing diseases and all information of a medical or sanitary nature that may be necessary and of value in the preservation of the public health, and for this purpose a State Bureau of Vital Statistics is created, to be under the direction and supervision of the State Health Officer, as registrar of said bureau, with office at the office of the State Board of Health. The said registrar of vital statistics shall formulate, print and furnish suitable blanks for collecting and compiling such statistics, to be paid for by the State Board of Health, and he shall as often as once in three (3) months tabulate and publish such statistics, and furnish copies of the same to incorporated cities within the State and gratuitously distribute such copies, and to other States of the United States as may be deemed advisable by the State Board of Health.

SEC. 2. The State Board of Health shall establish and maintain its office at some convenient and suitable point, at which place shall be kept the records and papers of the Board and of the State Bureau of Vital Statistics. The regular meeting of the State Board of Health shall be on the second Tuesday in January of each year.

SEC. 3. The State Board of Health shall be increased in members by the addition thereto of the Governor and the State Health Officer as *ex officio* members. The President of the State Board of Health and the State Health Officer shall constitute an executive committee of said Board, and shall have full powers, *ad interim*, of the regular meetings of the Board, to make such rules and regulations, and do all other things that may be necessary to prevent disease and protect the public health, not inconsistent with the act creating the State Board of Health, approved February 20, 1889, nor with the provisions of this act, reporting their actions to the Board at its next meeting for approval.

SEC. 4. It shall be the duty of the State Board of Health to organize as a corporation under the general incorporation acts of the State of Florida, in order to legally acquire and

Digitized by Google

control, on behalf of said State, such property as the nature of the duties of said Board may require for the prevention of disease, and preservation of the public health.

SEC. 5. The State Board of Health is hereby empowered to erect and acquire on the sea coast of the State of Florida such disinfecting stations as it shall deem necessary to protect the State from the introduction of disease, to be established and maintained by the State Board of Health under the direction of the State Health Officer, and under rules and regulation to be formulated and published for the surveillance, inspection and disinfection of vessels, cargoes, ballast or baggage of passengers, and the collection of fees for such service.

SEC. 6. The State Health Officer shall have the general administrative and executive control of all the maritime and domestic quarantine system of the State. He shall have power to make arrests without warrant for any violation of any quarantine rules and regulations of the State Board of Health or the Executive Committee of the same, after they have been duly promulgated. He shall also have power to deputize sanitary agents for that purpose. In all such cases the person or persons arrested for violating the quarantine and sanitary rules aforesaid, shall be surrendered to the custody of the nearest sheriff and formal complaint made against him, her or them in accordance with law.

SEC. 7. It shall be the duty of the State Health Officer to visit such cities or towns or other places in the State of Florida, and investigate their sanitary condition whenever in his judgment or the opinion of the President of the State Board of Health it may be deemed necessary, and it shall be his duty to condemn in any of said cities or towns or other places whatsoever in his judgment shall be likely to produce, cause or propagate disease, and he shall give notice to the mayor and council of any such town or city or other authority, to repair, remove, cleanse or remedy the same, and if it shall not be done in a reasonable period of time, it shall be his duty to make a report of the same with all the facts pertaining thereto to the State's Attorney of the Circuit Court having legal jurisdiction, or to the prosecuting officer of a court of criminal record established in said place or county, who shall proceed at the next term of court against any mayor or council or other authority of any city or town failing to comply with the advice or direction of the State Health Officer; *Provided*, That whenever in the occurrence of any epidemic, contagious or infectious disease, it may be necessary by the State Health Officer, for the preservation of the public health, to destroy

Digitized by Google

any property, a list or memorandum of the property condemned shall be made and valuation placed upon the same by three disinterested freeholders, one to be selected by the State Health Officer, one to be selected by the owner of the property and the third to be selected by the two freeholders already selected, before being condemned or destroyed, and the value of any private property that may be condemned and ordered to be destroyed by the State Health Officer shall be paid to the owner thereof out of any funds provided and unappropriated for the expenses of the State Board of Health, upon the certificate of the said State Health Officer that said property was so destroyed, approved by the President of the Board; and provided, further, that the said board of arbitration shall be paid by the State Board of Health for their services.

SEC. 8. The State Health Officer shall be allowed actual expenses when away from his home in the discharge of his duties as State Health Officer or Secretary of the State Board of Health, or registrar of vital statistics, upon vouchers duly approved by the President of the State Board of Health, out of the funds provided for the support and maintenance of the State Board of Health.

SEC. 9. All laws or parts of laws in conflict with the provisions hereof be and the same are hereby repealed.

SEC. 10. This act shall take effect from and after its approval by the Governor.

SENATE BILL No. 140.

A BILL to be entitled An Act to Establish a Bureau of Vital Statistics in and for the State of Florida.

Be it enacted by the Legislature of the State of Florida:

SECTION 1. That in each county in the State of Florida the County Judge thereof shall keep a record of births and deaths of persons occurring in their respective counties, numbering, recording and indexing the same in books to be kept exclusively for that purpose.

SEC. 2. The record of births shall note in separately ruled columns the lineal number of the entry, date and place of birth, sex, race or color, name of child, name of father, maiden name of mother, race or color of father and of mother, residence of parents, place of birth of parents, occupation of father, legitimacy or illegitimacy of child, whether born alive or dead and date of record.

Digitized by Google

SEC. 3. Record of the deaths shall note in separately ruled columns lineal number of entry, date of death, name of disease, sex, age, condition (whether married, single or widowed), cause of death, race or color, place of residence, place of birth (if known), place of burial, medical attendant if any, and date of record.

SEC. 4. In the matter of births it shall be and is hereby made the duty of each householder, master of a ship or boat, superintendent or keeper of an asylum, prison or home, in whose house, vessel or institution the birth of an infant may occur, also of the father or mother surviving, or of any person or persons who were present at or cognizant of the birth of a child, living or dead, in the State of Florida, within thirty days thereafter, to report to the County Judge of the county in which a birth occurs all facts relating thereto hereinbefore enumerated, and made material, of which they may have knowledge.

SEC. 5. In the matter of deaths it shall be and is hereby made the duty of such persons as are designated in the preceding section within thirty days after the occurrence of a death of any person dying in the State of Florida, to report the fact to the County Judge of the county in which the death occurred, together with such particulars as are hereinbefore mentioned and made material, and are within the knowledge of said parties.

SEC. 6. That any person, hereinbefore required to make reports of births or deaths coming to their knowledge, who shall wilfully fail or refuse so to do within the time prescribed by law shall be deemed guilty of a misdemeanor, and, upon conviction thereof, shall be fined a sum of one dollar and not exceeding twenty-five dollars, and required to pay the cost of prosecution.

SEC. 7. Books, with printed heads and ruled so as to comply with the requirements of this act, for the entry of record of births and deaths shall be supplied the several County Judges' offices by the State Board of Health within sixty days from the passage of this act.

SEC. 8. On the first Monday of each and every month it shall be and is hereby made the duty of each County Judge to transmit to the State Board of Health a certified tabulated statement of the births, deaths and marriages occurring in their respective counties during this preceding month, together with other data herein provided for, and such report shall be made on printed forms to be supplied by the State Board of Health on the requisition of County Judges.

SEC. 9. That for numbering, entering and indexing in the

Digitized by Google

proper books of the data herein provided for, and certifying the same to the State Board of Health as provided in the preceding section by the County Judge, shall entitle that officer to receive a fee of twenty-five cents, to be allowed and paid by the State Board of Health monthly on sworn returns of the number and nature of entries made by County Judges; *Provided*, That in counties having a population of over sixteen thousand the fees allowed County Judges for the services herein required shall be fifteen cents in each case.

SENATE BILL No. 166.

A BILL to be entitled An Act to Amend An Act to Provide for the Appointment of County Boards of Health in and for the Several Counties of the State of Florida, and Define their Powers, being Chapter 3859, Laws of Florida, Approved June 7, 1889.

Be it enacted by the Legislature of the State of Florida:

SECTION 1. That Section 4 of said act be amended so as to read as follows:

"SEC. 4. Every such Board shall annually elect from its members a President and a Secretary, who shall constitute the executive committee of said Board; the Secretary may also receive for his services such additional compensation to the per diem allowances as the Board may deem proper; *Provided*, That such additional compensation may be paid to the President of said Board in counties in which are located seaport cities having a population of 5,000 and upwards, as may meet the approval of the State Board of Health, to be paid out of any other funds than those raised by taxation."

SEC. 2. That Section 10 be amended so as to read as follows:

"SEC. 10. The County Commissioners of each county in the State in which a Board may be constituted may, if they deem it necessary to do so, assess and levy or cause to be assessed or levied a tax not to exceed in any year one (1) mill on the dollar, at the request of the Board of Health of the county to enable such Board to defray the expenses of its operation, which tax shall be assessed and collected as other taxes are assessed and collected, and the revenue thus derived shall be paid over to the County Treasurer, which shall be a separate fund, and shall be set apart as a county health fund, and shall be used for no other purpose whatever."

SEC. 3. That Section 13 of said act be made Section 14 and the following be inserted as Section 13:

"SEC. 13. All bills and accounts to be paid out of the

Digitized by Google

county health fund shall be audited by the County Board of Health and approved by the President of said Board and attested by the Secretary, and delivered by the said Secretary to the Clerk of the Board of County Commissioners, who shall present said bills or accounts to the Board of County Commissioners at their first meeting, and they shall at once issue their warrant on the County Treasurer for all such bills and accounts to be paid out of the county health fund; *Provided*, That the Board of County Commissioners shall have the right to scrutinize all such bills and accounts and to order such corrections in them as they may find necessary.

COUNTY BOARD OF HEALTH ACT.

AN ACT to Provide for the Appointment of County Boards of Health in and for the Several Counties of the State of Florida, and Define their Powers, with Amendments, approved June 10, 1891.

Be it Enacted by the Legislature of the State of Florida:

SECTION 1. The Governor of this State, with the advice and consent of the Senate, may, as soon as practicable after the passage of this act, appoint for every county in this State a Board of Health, consisting of three discreet persons; *Provided*, That members of County Boards of Health now established may serve out the term of office for which they were appointed.

SEC. 2. The pay of the members of any such Board shall be two dollars per diem when in actual attendance, and ten cents per mile for the distance traveled to and from the place of meeting. A majority of the members present shall constitute a quorum for the transaction of business, and, unless prevented by epidemic disease, all official meetings of such Board shall be held at such place as the President of said Board or a majority of the members may elect.

SEC. 3. The term of office for each person appointed on such Board of Health shall be four years, or until his successor is appointed and qualified, and all vacancies, however occurring, shall be filled by the Governor.

SEC. 4. Every such Board shall annually elect from its members a President and a Secretary, who shall constitute the Executive Committee of said Board. The Secretary shall also act as Treasurer and may receive for his services such additional compensation, not exceeding seventy-five dollars per month, to the per diem allowance, and give bond for the faithful discharge of his duties to the Board, as the Board may

Digitized by Google

deem proper; *Provided*, That such additional compensation, not exceeding one hundred dollars per month, may be paid to the President of said Board in counties in which are located seaport cities having a population of five thousand and upwards, as may meet the approval of the State Board of Health, to be paid out of any other funds than those raised by taxation.

SEC. 5. Every Board of Health thus created shall have full power to abate nuisances prejudicial to the public health, to appoint and suitably compensate Health Inspectors and Port Sanitary Inspectors and such other officers and agents as they may find necessary, who shall be subject to removal at the pleasure of the Board, and any person who shall interfere with, hinder or oppose any such agent, officer, or member of the Board in his or their discharge of duty as such, shall be guilty of a misdemeanor, and upon conviction shall be fined in a sum not to exceed one thousand dollars or by imprisonment in the county jail not more than six months; *Provided, however*, That nothing in this section shall be construed as preventing or opposing a member or any officer or agent of the State Board of Health from exercising or performing any of the requirements of the act creating a State Board of Health, or any of the rules and regulations of said Board; *and Provided, further*, The appointment of all Port Sanitary Inspectors must be approved of by the State Board of Health before said Inspectors enter upon the duty of their office.

SEC. 6. Every County Board of Health thus created shall be amenable to and obey all rules and regulations of the State Board of Health that have been or may hereafter be promulgated by said State Board of Health, prescribing the duties of County Boards of Health, and may adopt such rules and regulations as may be needful for the preservation of the public health of the county and for the surveillance, inspection or disinfection of vessels, baggage or cargoes, and the collection of fees for such service, and which shall not be in conflict with the act creating and establishing a State Board of Health, approved February 20th, 1889, or any of the rules and regulations of said State Board of Health; and any person or officer of any chartered city or town or any corporation, who shall violate any such rule or regulation, after the same shall have been published ten days in some newspaper printed in the county, shall be guilty of a misdemeanor, and, upon conviction, shall be fined in a sum not to exceed one thousand dollars, or by imprisonment in the county jail not more than six months; *Provided*, That under such rules and regulations no vessel coming from a healthy

Digitized by Google

port and with a healthy crew shall be subjected to any detention in quarantine or expense, other than such as may be absolutely necessary for the ascertainment of her sanitary condition by the Port Inspector, and in no case shall any such vessel be compelled, by any quarantine rule or regulation of any County Board of Health, to deviate from her straight course between the mouth of any harbor and her loading or discharging ground in such harbor; but during such period all vessels entering any harbor under the jurisdiction of any County Board of Health shall be inspected at a convenient point at or near the mouth of said harbor; *Provided*, That in all cases under the provisions of this act the Executive Committe of the County Boards of Health shall, upon proper representations, review the decision of the Port Inspector ordering a vessel into quarantine, and cancel, modify or confirm the same; *and Provided, further*, That before any rules and regulations of any such County Boards of Health are adopted, they must formally be approved of by the State Board of Health.

SEC. 7. The fees originating from the disinfection and fumigation of vessels, and the proceeds of the one mill tax, when the same has been levied, shall be turned over to the County Boards of Health to be used by them solely for the strict and proper maintenance of their quarantine regulations; *Provided*, Each of said County Boards of Health shall, on or before the first day of November in each and every year hereafter, make to the the Board of County Commissioners in the county where such Board of Health is established, a full and exact statement of its financial receipts and disbursements for the preceding year or part of a year, including a specification of all amounts received for fumigation, inspection, ballast discharge, and other quarantine service rendered by said Board, and the proceeds of the one mill tax, when the same has been levied, and all sums by said Board expended, and the person or persons to whom and the purposes for which the same were paid. The County Commissioners shall cause said statement to be published one time in some newspaper printed in said county, or to be posted in a conspicuous place at the county court house in said county; *and Provided, further*, That any balance of the one mill tax for the preceding year, when the same shall have been levied as hereafter provided for, remaining unexpended in the treasury of any Board of Health on the first day of February of any year, shall be by such County Board of Health turned over to the Treasurer of said county, to be by him merged into the general revenue fund of said county.

SEC. 8. Every Board of Health existing under the provis-

Digitized by Google

ions of this act shall be a corporation, with power to sue and contract, and to acquire and dispose of property, both real and personal, and to do every other act necessary to the proper discharge of its functions as a Board of Health.

SEC. 9. An act entitled an act to provide for the appointment of County Boards of Health and to define their powers, approved February 16, 1885, be and the same is hereby repealed.

SEC. 10. The County Commissioners of each county in the State in which a Board may be constituted, shall assess and levy, or cause to be assessed and levied, a tax not to exceed in any one year one mill on the dollar, at the request of the Board of Health of the county, to enable such Board to defray the expenses of its operation.

SEC. 11. The Boards of Health of counties separated by water shall have concurrent jurisdiction over such water, and each Board shall have the exclusive jurisdiction over and control of any quarantine station which it may establish in such waters; *Provided*, That public notice be given by advertisement in some newspaper published in the county of the metes and bounds of the station.

SEC. 12. Any such Board of Health may have injunction issued out of chancery upon bill filed to restrain the violation of, compel obedience to any rule or regulation adopted by it for the protection of the public health; *Provided*, That no bond shall be required of the Board of Health proceeding under the provisions of this section; *and Provided, further*, That the rules and regulations of said Board of Health shall not be in conflict with the rules and regulations established by the State Board of Health, except whenever the State Board of Health shall approve of and ratify the rules of County Boards of Health.

SEC. 13. This act shall take effect immediately upon its approval by the Governor.

Approved June 7, 1889.

Amendments approved June 10, 1891.

Digitized by Google

FLORIDA STATE BOARD OF HEALTH.

JANUARY, 1891.

Deaths occurring in the sixteen counties and two cities of the State of Florida, below named, during January, 1891, classified by diseases. Total population, 151,127. Birth rate, 15.32. Death rate, 16.19. Ages of decedents. Other statistical data.

DISEASES.	Alachua	Brevard.	DeSoto.	Escambia.	Franklin.	Hillsborough.	Leon.	Marion.	Nassau.	Orange.	Osceola	Putnam.	St. Johns.	Taylor.	Volusia	Wakulla.	Jacksonville.	Pensacola.	Total.
Alcoholism										1									1
Apoplexy.													2						2
Asthma						1													1
Blood Poisoning			1														1		2
Bowels (inflammation)								1				1					1		3
Bright's Disease	1		1										1					1	4
Bronchitis													1				3		4
Burns													1						2
Cancer (stomach)																	2		3
Cerebral Congestion																	1	2	3
Cerebral Softening		1																1	1
Child-birth		1						3											3
Consumption								2	1	3		2	3				14		25
Convulsions									1				1				1		3
Dentition																	1		1
Diarrhœa												2							2
Diphtheria																		1	1
Dropsy				1			1										1		3
Drowned															1			1	2
Enteritis					1												1		2
Fever (malarial)						1				1							2		4
Fever (puerperal)						1			1										2
Fever (typhoid)								1							1		3	2	7
Heart Disease				1		1		1		1			1						5
Hemorrhage (arterial)																	1		1
Hemorrhage (bowels)	1																		1
Hemorrhage (lungs)																	1		1
Hemorrhage (not stated)	1	1																	2
Icterus																	1		1
Inanition																	3	3	6
LaGrippe						1		3		1		1							6
Liver, Congestion of																	1		1
Lungs, Congestion of								1	1				1				2		5
Marasmus																	2		2
Meningitis																	1		1
Myelitis																	1		1
Nephritis																	1		1
Paralysis				1	1				1			1					1		5
Peritonitis	1																1		3
Pertussis										1									1
Pneumonia	4			5	1	3		4	1	1			2	1			9	5	36
Premature Birth						1		2											3
Rheumatism						1													1
Senile Decay	1					3	2	1	1			1	2				1	2	13
Still Birth	1			1		2							1				3		8
Suicide						1													1
Tetanus																		1	1
Tonsilitis																	1		1
Trismus Nascentium							1										2		3
Ulcer (bowels)												1							1
Uræmia																	1		1
Wounds (gunshot)						1													1
Cause not given		1	2							1		1		1			1		10
Totals in each county	10	4	4	9	3	15	5	20	7	10	0	10	16	2	2	0	66	21	204

Digitized by Google

DEATHS—AGES.

JANUARY, 1891.	White.		Colored.		Total
	M.	F.	M.	F.	
Under one year	5	6	9	16	36
Between 1 and 5 years	1	1	...	3	5
Between 5 and 10 years	2	3	1	1	7
Between 10 and 15 years	1	...	...	...	1
Between 15 and 20 years	3	2	3	1	9
Between 20 and 25 years	4	1	4	2	11
Between 25 and 30 years	7	2	9	2	20
Between 30 and 40 years	13	12	5	9	39
Between 40 and 50 years	8		5	4	17
Between 50 and 60 years	6	5	4	..	15
Between 60 and 70 years	9	3	1	2	15
Between 70 and 80 years	1	5	2	4	12
Between 80 and 90 years	2	3	3	.....	8
Between 99 and 109 years	...	...	.....	1	1
Not stated	2	3	....	3	8
Totals	64	46	46	48	204

SUMMARY—Number of counties reporting, 16; number of births reported, 193; number of marriages, 186; number of deaths reported, 204; number of deaths under 5 years old reported, 41.

It is respectfully suggested that Secretaries when compiling reports be more careful to have the totals of "Causes of Deaths" and "Deaths—Ages" agree, as it is impossible for the State Bookkeeper to determine which column is in error.

"Any person who violates, disobeys, omits, neglects or refuses to comply with any quarantine regulations which may be established by the State Health Officer, or any of the rules and regulations which may be adopted by the State Board of Health, as hereinbefore provided, that may be duly promulgated by the said State Health Officer or the said Board of Health, shall be guilty of a misdemeanor, and upon conviction thereof shall be fined in a sum not less than $100 nor more than $1,000, or by imprisonment in the county jail for not less than one or more than six months." See Chapter 3889, Laws of the State of Florida, approved February 20, 1889.

Secretaries of County Boards of Health will confer a favor by referring occasionly to the various circular letters and instructions printed on reports issued by this office, giving directions in regard to the proper manner of filling in the blanks used for vital statistics, and see that due care is observed to compile their returns in accordance therewith.

Digitized by Google

FLORIDA STATE BOARD OF HEALTH.

FEBRUARY, 1891.

Deaths occurring in the thirteen counties and two cities of the State of Florida, below named, during February, 1891, classified by diseases. Total census population, 139,875. Birth rate, 13.49. Death rate, 13.04. Table of ages of decedents. Other statistical data.

DISEASES.	Alachua.	Brevard.	Duval.	Escambia.	Hillsborough	Marion.	Nassau.	Orange.	Osceola.	Putnam.	St. Johns.	Taylor.	Volusia.	Jacksonville.	Pensacola.	Total.
Abcess (bowels)	..	..	..	..	..	..	1	..	..	..	..	..	..	..	..	1
Accident	..	..	..	..	1	..	..	..	..	..	..	..	..	1	..	2
Angina Pectoris	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	1
Apoplexy	..	..	..	..	..	..	..	..	..	..	1	..	..	1	..	2
Asthenia	1	..	..	..	..	..	..	..	..	..	..	..	..	3	..	4
Bowels, congestion of	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1
Bright's Disease	..	..	..	..	1	..	..	1	..	..	..	..	..	..	1	3
Bronchitis	..	..	..	..	..	..	..	..	..	..	..	..	2	2	..	4
Cerebral Congestion	..	..	..	..	..	2	..	..	..	..	..	..	..	..	..	2
Child-birth	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	1
Congestion	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	1
Consumption	2	1	2	..	3	..	1	..	..	..	2	..	..	9	3	23
Convulsions	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	1
Dentition	..	..	..	..	..	..	1	..	..	..	..	..	..	..	..	1
Diarrhœa	..	..	..	..	..	..	..	2	..	..	..	..	..	..	1	3
Dropsy	..	..	..	..	1	..	..	..	..	..	..	..	..	1	..	2
Drowned	..	..	..	..	1	..	..	..	..	1	..	..	..	1	1	4
Enteritis	..	..	..	..	1	..	..	..	..	..	..	..	..	1	..	2
Fever, Malarial	..	..	..	..	..	..	..	..	..	..	1	..	..	5	..	6
Gastro Enteritis	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..	1
Haemoptysis	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	1
Heart Disease	..	..	1	..	..	..	..	..	..	..	3	..	..	1	3	8
Hemorrhage, Lungs	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	1
Hemorrhage, Umbilical	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	1
Inanition	..	..	..	..	..	..	..	..	..	..	1	..	..	..	..	1
Influenza	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	1
Jaundice	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..	1
LaGrippe	..	..	..	..	2	1	..	1	..	..	..	..	..	..	..	3
Liver, Congestion of	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1
Marasmus	..	..	..	..	1	..	1	..	..	..	1	..	..	2	1	6
Meningitis	..	..	..	..	..	..	..	..	1	..	..	..	..	1	..	2
Nephritis	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	1
Paralysis	1	..	..	1	..	..	..	1	..	..	1	..	..	..	..	4
Peritonitis	..	..	..	..	..	..	..	..	..	..	1	..	..	..	..	1
Pneumonia	3	1	..	1	..	3	1	..	..	1	1	..	..	5	4	20
Poisoning, Septic	..	..	..	..	..	..	..	..	1	..	..	..	..	..	..	1
Premature Birth	..	..	..	..	..	..	..	..	..	..	2	..	..	..	..	2
Rheumatism	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	1
Senile Decay	..	..	..	..	1	..	..	1	..	..	..	..	..	3	1	6
Snake Bite	..	..	..	..	..	..	..	..	..	..	..	..	1	..	..	1
Spina Bifida	..	..	..	..	..	..	..	..	1	..	..	..	..	..	..	1
Still-birth	..	..	..	..	..	..	..	..	..	..	..	1	..	5	..	6
Trismus Nascentium	..	..	..	..	..	..	..	..	..	..	..	..	..	2	..	2
Ulcer, Throat	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..	1
Wounds, Gunshot	..	..	1	..	..	..	..	..	..	..	..	1	..	..	..	2
Cause not given	1	..	1	..	2	..	..	..	1	3	..	..	1	3	..	12
Totals in each county	9	2	5	5	16	7	5	6	4	5	14	3	4	51	20	152

Digitized by Google

DEATHS—AGES.

FEBRUARY, 1891.	White.		Colored.		Total
	M.	F.	M.	F.	
Under 1 year	10	6	8	10	34
Between 1 and 5	....	1	2	1	4
Between 5 and 10		...	..	1	1
Between 10 and 15	1	...	.	.	1
Between 15 and 20	2	3	2	3	10
Between 20 and 25	3		4	4	11
Between 25 and 30	1	4	2	5	12
Between 30 and 40	6	4	2	3	15
Between 40 and 50	5	4	7	1	19
Between 50 and 60	4	6	3		11
Between 60 and 70	4	4	4	1	13
Between 70 and 80	2	6	1	3	12
Between 80 and 90	2			2	4
Not stated	1	1	2	1	5
Totals	41	39	37	35	152

SUMMARY—Number of counties reporting, 13; number of births reported, 157; number of marriages reported, 155; number of deaths reported, 152; number of deaths under five years reported, 38; number of deaths over seventy years reported, 16.

The following counties, usually quite prompt, failed to make returns: DeSoto, Franklin, Lake, Monroe, Polk and Santa Rosa. It is hoped these counties will endeavor to remove this stigma by redoubled efforts in the future

---

Reliable Vaccine Virus can be had at the office of the State Board of Health by applying for it. The virus is supplied to this office at sixty dollars per thousand points; and will be furnished at this rate upon application. Not less than ten points sold.

As proof of the beneficent results of vaccination it is only necessary to note that in Holland between 1870 and 1873 there were 20,575 deaths caused by small-pox. A stringent law was enacted making vaccination compulsory, with the result that small-pox mortality has steadily decreased from year to year. During 1890 only one death is reported as occurring in Holland from that disease. During the past year over five thousand people have been vaccinated in this State. Can it be denied that we as a people are better protected from small-pox than we were a year ago? Therefore let me urge upon you the necessity for giving this important matter your serious attention.

JOSEPH Y. PORTER, M D.,
State Health Officer.

Jacksonville, Fla., March 15th, 1891.

Digitized by Google

FLORIDA STATE BOARD OF HEALTH.

MARCH, 1891.

Deaths occurring in the thirteen counties and two cities of the State of Florida, below named, during March, 1891, classified by diseases. Total census population, 140,677. Birth rate per 1,000 per annum, 16.81 Death rate per 1,000 per annum, 12.36. Ages of decedents. Other statistical data.

DISEASES.	Alachua.	DeSoto.	Duval.	Escambia.	Hillsborough.	Leon.	Marion.	Orange.	Osceola.	Putnam.	St. Johns.	Taylor.	Volusia.	Jacksonville.	Pensacola.	Total.
Abscess, Cereoral								1								1
Abscess, not stated								1								1
Angina Pectoris								1		1						2
Apoplexy					1						1			1	1	4
Blood Poisoning										1				1		1
Bright's Disease											1			2		3
Burns	1						2									3
Cancer, Liver									1							1
Cancer, Stomach														1		1
Cancer, Womb															1	1
Cancer, not stated							1	1							1	3
Catarrh			1													1
Cerebral Congestion							1		1					2		4
Cerebral Meningitis											1					1
Chorea					1											1
Congestion, Stomach							1									1
Consumption	3				2		4	3		1	2		1	11	2	31
Convulsions												1		1		2
Cystitis														1		1
Diarrhœa	1								1							3
Diphtheria										1						1
Dropsy			1		1											2
Drowned				1												1
Enteritis														1		1
Entero Colitis					1											1
Fever, Malarial													1			1
Fever, Puerperal		2				1										3
Fever, Typhoid					1		2								2	5
Fracture of Skull											1					1
Gangrene														1		1
Gastritis															1	1
Heart Disease					2	1	1	1			3			1		9
Hemorrhage, Uterine			1													1
Homicide					1											1
Inanition											1					1
Inflammation of Navel	1															1
Inflammation, Bowels										1						1
Intiuenza						1										1
Internal Obstruction					1											1
LaGrippe	1											1				2
Liver, Disease of										1						1
Lungs Congestion							1						1	1		3
Marasmus		1														1
Malarial Taxemia																2
Mening t s			1											1	1	3
Paralysis	1								1					1		3
Parotitis		2									1					1
Peritonitis														1		1
Pneumonia					1		1	2		1		1		4	4	14
Poisoned Opium														1		1
Premature Birth					1											1
Sarcoma of Shoulder														1		1
Scrofula				1												1
Senile Decay		1					2							2		5
Stillborn									1	3	1					5
Stricture																1
Tetanus														1	2	3
Thrush																1
Trismus Nascentium					1									1		1
Tumor, Bowels														1		1
Ulcer, Throat							1									1
Wounds, R R. Cars																1
Wounds, not stated															1	1
Cause not stated										1				1		4
Totals in each county	9	6	6	4	13	3	18	11	5	10	12	3	3	40	16	159

Digitized by Google

DEATHS—AGES.

MARCH, 1891.	White.		Colored.		Total
	M.	F.	M.	F.	
Under 1 year	8	4	5	8	25
Between 1 and 5	.....	3	2	1	6
Between 5 and 10	2	1	1	.....	4
Between 10 and 15	1	.....	.....	2	3
Between 15 and 20	4	2	..	6	12
Between 20 and 25	4	2	1	4	11
Between 25 and 30	3	5	1	1	10
Between 30 and 40	13	3	8	4	28
Between 40 and 50	1	4	6	2	13
Between 50 and 60	3	5	.....	2	10
Between 60 and 70	6	3	2	1	12
Between 70 and 80	4	3	3	2	12
Between 80 and 90	....	1	2	.....	3
Between 90 and 100	.....	.....	.....	.....	.....
Over 100 years	1	.....	.....	.....	1
Not stated	2	2	3	2	9
Total	52	38	34	35	159

SUMMARY.

Number of counties reporting	13
Total census population of said counties	140,677
Number of births reported from said counties	197
Number of marriages reported and from said counties	169
Number of deaths reported and from said counties	159
Death rate per 1,000 per annum	12.36
Birth rate per 1,000 per annum	16.81

PHTHISIS STATISTICS.

The mean death rate from all causes for the whole world (Byres in "Reference Hand-Book of the Medical Sciences") is 22 for 1,000 population The average for phthisis is 3 for 1,000, or nearly one-seventh of the whole mortality. Northern United States average 2.82 for 1,000 population; Southern States, 4.25 per 1,000. Whites 2, and Negroes 7 per 1,000 population.—Exchange.

The Chicago Health Officer refuses to accept "Heart Failure" as a cause of death. He returns death certificates so filled out with a request for information as to the real cause of death.—Exchange.

"Dr. Baker, the efficient Secretary of the Michigan State Board of Health, asserts that recent advances in sanitation are saving one hundred lives a year from death by small-pox; four hundred from scarlet fever, and six hundred from diphtheria, within the limits of that single State. Eleven hundred lives saved from these three forms of death! And yet modern sanitation is in its infancy."

Digitized by Google

FLORIDA STATE BOARD OF HEALTH.

APRIL, 1891.

Deaths occurring in the twelve counties and two cities of the State of Florida, below named, during April, 1881, classified by diseases. Total population, 141,681. Birth rate per 1,000 per annum, 14.66. Death rate per 1,000 per annum, 13.22. Table of ages of decedents. Other statistical data.

DISEASES.	DeSoto.	Escambia.	Hillsborough.	Leon.	Levy.	Marion.	Orange.	Osceola.	Polk.	Putnam.	Taylor.	Volusia.	Jacksonville.	Pensacola.	Total.
Accident	..	..	..	1	..	3	..	1	..	..	..	..	..	..	5
Apoplexy	..	..	..	..	..	..	..	..	..	..	..	..	3	..	3
Asthma	1	..	1	..	..	..	..	..	..	..	..	..	..	..	2
Blood Poisoning	..	..	..	..	..	..	..	..	..	1	..	..	..	..	1
Bowels, Congestion	..	..	..	..	..	1	1	1	..	..	..	..	..	..	3
Bright's Disease	..	..	..	..	..	..	..	..	..	..	..	..	1	..	1
Bronchitis	..	..	1	..	..	1	..	..	..	..	..	..	..	1	3
Cancer, not stated	..	..	..	..	..	1	2	..	..	..	..	..	..	..	3
Cancer, Uterine	..	..	..	..	..	..	..	..	..	..	..	..	..	1	1
Cerebral Congestion	..	..	1	..	..	1	..	..	..	..	..	..	1	..	3
Cerebral Hemorrhage	..	..	..	..	..	..	..	..	..	..	..	..	1	..	1
Cerebral Meningitis	..	1	..	..	..	..	..	..	..	..	..	..	..	..	1
Cerebral Softening	..	..	..	..	..	..	..	..	..	..	..	..	1	..	1
Cholera Infantum	..	..	1	..	..	1	..	..	..	..	..	..	..	..	2
Consumption	..	1	3	..	..	3	4	2	..	3	..	..	14	1	31
Convulsions	..	..	..	..	..	1	..	..	..	..	..	..	..	..	1
Dentition	..	..	..	..	..	..	..	..	..	..	..	..	1	..	1
Diarrhœa	..	..	6	..	..	..	1	1	..	1	..	..	1	..	10
Dropsy	..	..	..	..	..	..	..	..	..	..	..	..	1	1	2
Drowned	..	..	..	..	..	..	..	1	..	..	..	..	..	1	2
Enteritis	..	..	..	..	..	..	..	..	..	..	..	..	1	..	1
Entero Colitis	..	..	1	..	..	..	..	..	..	..	..	2	..	..	3
Empyema	..	..	..	..	..	..	..	..	..	..	..	..	1	..	1
Fever, Malarial	2	..	1	1	..	2	2	..	..	..	..	..	1	..	9
Fever, Typhoid	1	1	3	..	..	..	..	..	..	1	..	..	..	..	6
Gastro Enteritis	1	..	..	..	..	..	..	..	..	..	..	..	2	..	3
Heart Disease	1	..	..	2	..	1	2	..	..	2	1	..	..	2	11
Hepatitis	..	..	1	..	..	..	..	..	..	..	..	..	..	..	1
Homicide	..	1	..	..	..	..	..	1	..	..	..	..	..	..	2
Inanition	..	..	1	..	..	..	..	..	..	..	..	1	..	..	2
Influenza	..	..	1	..	..	..	..	..	..	..	..	..	..	..	1
LaGrippe	..	..	..	..	..	..	..	1	..	..	..	..	..	..	1
Liver, Cirrhosis of	..	..	..	..	..	..	..	..	..	..	..	..	1	..	1
Marasmus	..	..	1	..	..	..	..	..	..	..	..	..	1	..	2
Measles	..	..	1	..	..	..	..	..	..	..	..	..	..	..	1
Meningitis	..	..	..	..	..	..	1	..	..	..	..	..	..	..	1
Nephritis	..	..	..	..	..	..	..	..	..	..	..	..	2	..	2
Paralysis	..	..	..	..	..	..	1	..	..	..	..	..	..	..	1
Peritonitis	..	..	..	..	..	..	..	..	..	..	..	..	1	..	1
Pneumonia	..	1	3	..	..	1	..	..	..	..	..	..	2	1	8
Premature Birth	..	..	..	..	..	1	..	..	..	..	..	..	..	..	1
Senile Decay	..	..	2	1	..	5	..	..	..	..	..	..	..	..	5
Stillborn	..	..	..	..	..	..	..	..	..	1	..	..	..	..	1
Tetanus	..	..	..	..	..	..	..	..	..	1	..	..	..	..	1
Tumor, Ovarian	..	..	..	..	..	..	..	..	..	..	..	..	..	1	1
Cause not given	2	..	3	..	..	2	..	..	..	..	..	..	2	..	9
Total in each county	8	5	31	6	..	24	14	8	..	10	1	3	38	9	159

Digitized by Google

DEATHS—AGES.

APRIL, 1891.	White.		Colored.		Total
	M.	F.	M.	F.	
Under 1 year	6	8	6	11	31
Between 1 and 5	4	2	1	2	9
Between 5 and 10	.....	2	....	.....	2
Between 10 and 15	.....	.....	.....	1	1
Between 15 and 20	.....	.....	3	1	4
Between 20 and 25	3	4	4	5	16
Between 25 and 30	5	3	2	3	13
Between 30 and 40	7	5	3	3	18
Between 40 and 50	9	3	7	1	20
Between 50 and 60	6	3	2	.....	11
Between 60 and 70	6	...	1	2	9
Between 70 and 80	5	4	.....	2	11
Between 80 and 90	.....	1	.....	.....	1
Between 90 and 100	.....	.....	.....	.....	.....
Over 100 years	.....	.....	.....	.....	.....
Not stated	7	5	.....	1	13
Total	58	40	29	32	159

As may be seen by reference to the other page of this report, the returns for the month of April have been very slim. Counties that have formerly reported very regularly have not made returns for this month; among those may be noted Alachua, Columbia, Duval, Franklin, Nassau, Monroe, St. Johns and Santa Rosa counties.

It is respectfully asked that secretaries in rendering their reports would see that they are properly endorsed on the back, as it saves much time in this office, besides enhancing the probability of its receiving prompt attention.

It is to be regretted that reports are furnished with such diverse nomenclature, making classification almost impossible. The attention of physicians and others is invited to the following diseases, in reference to which the particulars should be specified, it being absolutely essential to the proper classification of causes of deaths, and consequently to the accuracy and usefulness of our statistics of mortality. It is therefore respectfully requested that when reporting deaths from accident, abcess, cancer, homicide, tumor, wounds, etc., the variety and seat or location be given.

Reports are not complete unless they show the number of births and marriages. Secretaries of the County Boards will please use every endeavor to secure this information. There should be no difficulty whatever with the data in regard to marriages, as there is only one office in the county where marriage licenses can be obtained—that of the County Judge; and this personage will doubtless take great pleasure in furnishing the information desired.

It is urgently requested that the County Boards ascertain and return, when possible, the race, nativity and length of residence in Florida, of cases of phthisis; as in the absence of such particulars, an injustice is imposed upon localities, as well as the entire State.

JOSEPH Y. PORTER,
State Health Officer.

Jacksonville, Fla., May 20th, 1891.

Digitized by Google

FLORIDA STATE BOARD OF HEALTH.

MAY. 1891.

Deaths occurring in the nineteen counties and two cities of the State of Florida, below named, during May, 1891, classified by diseases. Total census population, 222,223. Birth rate per 1,000 per annum, 11 66. Death rate per 1,000 per annum, 11.73. Ages of decedents. Other statistical data.

DISEASES.	Alachua.	Columbia.	DeSoto.	Duval.	Escambia.	Hillsborough.	Lake.	Leon.	Levy.	Marion.	Monroe.	Nassau.	Polk.	Putnam.	Orange.	Osceola.	Taylor.	St. Johns.	Volusia.	Jacksonville.	Pensacola.	Total.
Abscess	..	..	..	..	..	..	..	..	..	..	..	2	..	..	1	..	..	..	1	..	2	3
Accident	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	..	..	..	..	2	3
Angina Pectoris	1	..	..	..	1	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1
Apoplexy	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	1	..	2
Asthma	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	..	..	..	1	..	2
Bowels, Congestion of	..	..	..	..	..	..	1	..	..	..	..	1	..	..	2	..	..	..	..	..	..	4
Bright's Disease	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	..	..	1
Bronchitis	..	..	..	..	..	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..	1
Cancer, not stated	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	..	1	..	1	3
Cancer of Testicles	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	..	..	1
Cerebral Congestion	..	..	..	..	..	..	..	..	..	..	3	..	..	..	..	..	..	..	..	1	..	4
Cholera Infantum	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	2
Cholera Morbus	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	..	..	1
Colic	..	..	..	..	..	..	..	..	..	..	2	..	..	..	..	..	..	..	..	..	..	2
Consumption	2	..	..	..	1	5	1	..	..	..	8	..	..	..	2	..	..	..	4	6	2	31
Cystitis	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	..	1
Dentition	..	..	..	..	..	..	..	..	..	..	2	..	..	..	..	..	..	..	..	..	..	2
Diarrhœa	2	..	..	..	..	..	..	..	..	1	..	1	..	..	1	..	..	1	..	4	..	10
Dropsy	..	..	..	..	1	1	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..	3
Drowned	..	..	..	..	..	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..	1
Eclampsia	..	..	..	..	..	..	..	..	..	..	3	..	..	..	..	..	..	..	..	..	..	3
Encephalitis	..	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1
Enteritis	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	2	..	2
Entero Colitis	1	..	..	..	..	..	..	..	..	..	1	..	..	..	..	..	..	1	1	..	..	4
Erysipelas	..	..	..	..	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..	..	1
Fever, Malarial	..	..	..	..	..	..	1	..	..	..	5	..	1	..	2	..	..	..	..	2	..	11
Fever, Puerperal	..	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..	..	..	1	..	2
Fever, Typhoid	1	..	1	..	..	1	..	..	..	..	1	..	..	..	1	..	..	1	..	1	3	10
Fracture of Skull	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	1
Gastritis	..	..	..	..	..	2	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	2
Heart Disease	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	2	..	2	..	4
Hemorrhage, Umbilical	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	1
Homicide	..	..	..	..	..	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..	1
Inanition	..	..	..	..	..	1	..	..	..	..	1	..	..	1	..	..	..	..	..	..	..	3
Intussusception	..	..	..	..	..	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..	1
Kidney, Inflammation	..	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1
LaGrippe	..	..	..	..	..	..	..	..	..	..	..	..	1	..	1	..	..	..	..	..	..	2
Leprosy	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	1
Lungs, Congestion of	..	..	..	..	..	1	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..	2
Marasmus	..	..	..	..	..	..	..	..	..	..	6	..	..	..	1	..	..	1	..	5	..	13
Measles	..	..	..	..	..	..	..	..	..	..	1	2	..	..	..	..	..	..	..	..	..	3
Meningitis	..	..	..	..	..	1	..	..	..	..	1	..	..	..	..	..	..	..	..	1	1	4
Nephritis	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	1
Paralysis	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	2	1	3
Paresis	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	1
Pertussis	..	..	..	..	..	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..	1
Pneumonia	1	..	..	..	1	..	2	..	1	1	..	..	1	..	..	..	1	..	1	..	..	9
Premature Birth	..	..	..	..	..	..	..	..	1	2	..	..	..	..	..	..	..	..	..	..	..	3
Senile Decay	..	..	..	..	..	..	..	..	..	2	..	..	..	..	..	..	..	1	..	2	..	6
Scrofula	..	..	..	..	..	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..	1
Snake Bite	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	..	..	..	..	..	1
Still-birth	..	..	..	..	..	..	1	..	..	1	..	..	..	..	..	..	..	..	..	..	..	2
Tetanus	..	..	..	..	..	..	..	..	..	..	6	..	..	..	..	..	..	..	..	1	1	8
Trismus Nascentium	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	1
Ulcer of Bowels	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	1
Cause not stated	..	..	..	..	..	1	1	1	..	..	1	2	2	1	1	3	1	..	..	..	..	18
Total	8	0	4	0	5	15	2	3	0	5	56	9	4	3	5	4	2	10	9	42	14	217

Digitized by Google

DEATHS—AGES.

MAY, 1891.	White.		Colored.		Total
	M.	F.	M.	F.	
Under one year	13	20	13	15	61
Between 1 and 5	6	6	6	7	25
Between 5 and 10	.....	1	1	1	3
Between 10 and 15	.....	2	1	.....	3
Between 15 and 20	1	1	3	1	6
Between 20 and 25	7	2	4	2	15
Between 25 and 30	3	5	4	5	17
Between 30 and 40	9	7	4	2	22
Between 40 and 50	7	2	2	2	13
Between 50 and 60	11	3	5	1	20
Between 60 and 70	5	7	1	1	14
Between 70 and 80	2	1	3	1	7
Between 80 and 90	1	2	.....	1	4
Between 90 and 100	.....	1	1	.....	2
Over 100 years	.....	.....	.....	.....	.....
Not stated	1	1	2	1	5
Total	66	61	50	40	217

SUMMARY.

Number of births reported	216
Number of marriages reported	229
Number of deaths reported	217
Number of deaths under five years of age reported	87

"Vital statistics, as some one said, furnish unerring lessons as to the health, prosperity and morals of a people. They teach us the influence of marriage over illigetimacy and immorality, the fecundity of the people, the number of children and their vital force; the duration of life, its expectation and value of all ages and races, the influence of meteorology, locality, occupation, in producing diseases and impoverishing health, and thereby enabling us to remove unfavorable conditions found where and when least expected."

SOME YEARLY APPROPRIATIONS FOR SANITARY PURPOSES.

New York City	$435.000
Massachusetts	111.300
Texas	61.000
Illinois	49.000
Mississippi	46.000
Minnesota	29.000
New York State	25,000
New Jersey	21 000
Wisconsin	20.000
Michigan	16.000
Alabama	13 000
Maryland	13.000
California	12.800
Connecticut	10,000

Digitized by Google

FLORIDA STATE BOARD OF HEALTH.

JUNE, 1891.

Deaths occurring in the seventeen counties and two cities of the State of Florida, below enumerated, during June, 1891, classified by diseases. Total census population, 170,954. Birth rate per 1,000 per annum, 15.93. Death rate per 1,000 per annum, 12.64. Ages of decedents. Other statistical data.

DISEASES.	Alachua.	Columbia.	Duval.	Escambia.	Franklin.	Hillsborough.	Lake.	Leon.	Levy.	Marion.	Orange.	Osceola.	Polk.	Putnam.	St. Johns.	Taylor.	Volusia.	Jacksonville.	Pensacola.	Total.
Accident	..	..	..	..	..	..	..	1	..	..	..	..	1	..	..	..	..	..	..	2
Alcoholism	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	1
Apoplexy	..	..	..	..	..	..	..	1	..	..	..	..	..	..	1	..	..	..	1	3
Blood Poisoning	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	..	..	..	1
Bowels, Inflammation of	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..	..	1	..	2
Bright's Disease	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	1
Cancer, Liver	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	..	..	..	..	1
Cancer, Stomach	..	..	..	..	..	..	..	..	..	..	1	..	..	..	..	..	..	..	..	1
Cancer, not stated	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	1	3
Cerebral, Congestion	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	..	..	..	..	1
Childbirth	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	1
Cholera Infantum	..	2	..	..	..	1	..	1	1	..	1	..	..	..	1	..	..	1	..	8
Congestion	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	2	3
Consumption	1	..	1	1	..	4	1	..	..	..	..	..	..	..	3	..	2	8	3	24
Convulsions	..	..	..	..	..	..	..	..	..	..	2	..	..	..	..	..	..	2	1	5
Croup	..	..	..	..	..	..	..	..	..	..	1	..	..	..	..	..	..	..	..	1
Dentition	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	2	..	2
Diarrhœa	1	..	..	1	..	1	..	..	..	..	1	..	..	1	..	..	..	2	3	11
Dropsy	..	1	..	..	..	..	..	..	..	..	..	1	1	..	..	..	..	2	..	5
Drowned	..	..	..	..	1	..	..	5	..	..	..	..	..	..	..	..	..	..	1	3
Eclampsia	..	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..	..	..	1
Enteritis	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	2	..	2
Entero Colitis	..	..	..	..	..	2	..	..	..	..	..	..	..	..	..	..	..	..	..	4
Eczema	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1
Fever, Congestive	..	..	..	..	..	..	..	..	..	1	..	..	..	..	..	..	..	1	..	2
Fever, Malarial	..	..	..	..	..	1	..	..	..	1	..	..	..	..	..	..	1	..	..	3
Fever Thypoid	1	2	1	..	..	3	..	1	2	..	2	1	..	..	..	..	..	8	4	25
Gastritis	..	..	..	..	..	..	..	1	1	..	..	..	..	..	..	..	..	1	..	3
Gastro Enteritis	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..	..	1	..	2
General Debility	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	..	..	..	..	1
Heart Disease	..	..	..	..	1	1	..	1	..	..	..	..	1	1	..	..	..	1	2	8
Inanition	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	2	..	2
Influenza	..	..	..	..	..	..	..	..	..	..	1	..	..	..	..	..	..	..	..	1
Lungs, Congestion of	..	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..	..	..	1
Lungs, Gangrene of	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	1
Marasmus	..	..	1	..	..	1	..	..	..	..	1	..	..	..	..	..	..	4	..	7
Measles	..	..	..	..	..	1	..	..	..	4	..	..	..	1	..	..	..	..	..	6
Meningitis	..	..	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..	1	..	2
Nephritis	..	..	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..	1	..	2
Paralysis	..	..	..	1	..	..	..	..	..	..	..	..	..	..	1	..	1	1	1	5
Peritonitis	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	..	1
Pneumonia	1	..	..	..	..	..	..	..	..	..	..	..	..	2	..	..	..	2	..	7
Senile Decay	..	..	..	1	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	4
Still-birth	..	..	..	..	..	2	..	..	..	..	1	1	..	..	..	..	..	4	..	8
Syphilis	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	1
Tetanus	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	..	1	..	2
Trismus Nascentium	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	1
Uraemia	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	1
Wounds, Gunshot	..	..	..	..	1	..	..	..	..	..	..	..	..	..	1	..	..	..	1	3
Wounds, Knife	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1
Cause not given	..	1	..	..	..	2	1	1	..	..	..	..	2	8	..	..	..	1	1	10
Total	6	8	3	4	3	24	4	9	4	6	13	3	5	8	9	0	5	58	26	191

Digitized by Google

DEATHS—AGES.

JUNE, 1891.	White.		Colored.		Total
	M.	F.	M.	F.	
Under one year	13	15	9	10	47
Between 1 and 5	4	3	8	5	20
Between 5 and 10	1	.....	.....	1	2
Between 10 and 15	1	1	.....	3	5
Between 15 and 20	2	3	1	3	9
Between 20 and 25	1	3	4	6	14
Between 25 and 30	4	2	3	4	13
Between 30 and 40	2	6	8	1	17
Between 40 and 50	5	4	1	4	14
Between 50 and 60	5	4	3	3	15
Between 60 and 70	6	3	3	4	16
Between 70 and 80	.....	4	.....	3	7
Between 80 and 90	.....	.....	.....	.....	.....
Between 90 and 100	.....	.....	.....	.....	.....
Over 100 years	.....	.....	.....	.....	.....
Not stated	3	3	3	3	12
Total	47	51	43	50	191

SUMMARY.

Number counties reporting	17
Census population	193,507
Number of births	227
Number of marriages	116
Number of deaths reported	191
Death rate per 1,000 per annum	12.64

"Vital Statistics tell us of the approach of terrific storms by which ignorant and negligent cities, and even nations, have been swept from the face of the earth. They constitute the bed-rock upon which life insurance is based, and when truthful and favorable, invite alike as immigrants the laborer and capitalist. Though ignored by the average legislator, their importance has been recognized and respected by Napoleon, Bismarck, Disraeli and Gladstone, of England, and by such men as Harris, Jones and Gibson, of the United States Senate. The establishment of a Bureau of Vital Statistics is a pretty fair index to the degree of civilization attained by a people or by their law-making representatives."

Digitized by Google

FLORIDA STATE BOARD OF HEALTH.

JULY. 1891.

Deaths occurring in the seventeen counties and two cities of the State of Florida, below enumerated, during July, 1891, classified by diseases. Total census population, 201,052. Birth rate per 1,000 per annum, 14.39. Death rate per 1,000 per annum, 16.24. Ages of decedents. Other statistical data.

DISEASES.	Alachua.	DeSoto.	Duval.	Escambia.	Hillsborough.	Lake.	Leon.	Levy.	Marion.	Monroe.	Orange.	Osceola.	Polk.	Putnam.	St. Johns.	Taylor.	Volusia.	Jacksonville.	Pensacola.	Total.
Abscess, Liver										1										1
Abscess, not stated															1					1
Accident		1																		1
Alcoholism					1															1
Angina Pectoris																		1		1
Apoplexy										3							1			3
Ascites																				1
Asthma																		1		1
Bowels, Congestion																		1		1
Bowels, Inflammation																		1		1
Bright's Disease																		1	1	2
Bronchitis																		2	1	3
Cancer, Uterine																			2	2
Cerebral Concussion								1												1
Cerebral Congestion	1						1								1					3
Cerebral Softening															1					1
Childbirth													1					1		2
Cholera Infantum					1					1					1			2		5
Colic										1										1
Consumption	11				2				1	7	2		3	2	1			8	1	28
Convulsions			1			2	1			1				1				3		9
Dentition			1															3		4
Defective Vitality									1	1										2
Diarrhœa			1						1				1						1	4
Dropsy				1						1									3	5
Drowned			1		1													1		2
Endocarditis																		1		1
Enteritis					1					2								1		4
Epilepsy																		1		1
Fever, Congestive							1					1								3
Fever, Malarial				1					1		1			1						4
Fever, Puerperal			1							1										2
Fever, Typhoid	1		1		1					21				1				10	10	47
Gastritis									1	1								1		2
Heart Disease		1			11				1	1					2			3	1	12
Hemorrhage, Cerebral	1																			1
Hemorrhage, Uterine			1																	1
Hemorrhage, not stated																			1	1
Hepatatis					1															1
Inanition					2										1		2			5
Insanity														1						1
Kidney Disease										1										1
Lightning													1							1
Liver, Congestion of																		1		1
Marasmus										6	1							10		17
Measles										3										3
Meningitis					1					1								1		9
Paralysis					1			1		1									1	4
Peritonitis					1															1
Pericarditis	1																			1
Pertussis														1						1
Pneumonia			1							1								1	1	4
Premature Birth															1					1
Rachitis										4										4
Rupture, Blood Vessel					1															1
Senile Decay				1						2	1		1					2	2	9
Septicæmia										2										2
Still Birth					2					6	1		1							16
Stricture, Bowels						1										1		3	2	1
Sunstroke										1										1
Tetanus																				2
Trismus, Nascentium																				3
Thrush										2								1	1	1
Tumor, Uterine												1		1				1		1
Ulcer, Bowels							1													1
Uræmia											1									1
Vermes																				1
Cause not stated					3		1				1		1					3	1	11
Total	5	2	9	3	30	2	9	2	6	78	7	3	7	10	9	2	2	16	29	272

Digitized by Google

DEATHS—AGES.

JULY, 1891.	White.		Colored.		Total
	M.	F.	M.	F.	
Under one year	22	20	12	19	73
Between 1 and 5	8	9	7	11	35
Between 5 and 10	2	.....	2	4	8
Between 10 and 15	.....	3	.....	3	6
Between 15 and 20	3	2	.....	3	8
Between 20 and 25	3	3	3	6	15
Between 25 and 30	3	5	1	1	10
Between 30 and 40	7	12	8	10	37
Between 40 and 50	8	3	6	5	22
Between 50 and 60	5	3	5	1	14
Between 60 and 70	3	4	2	2	11
Between 70 and 80	4	8	2	4	18
Between 80 and 90	.....	1	.....	1	2
Between 90 and 100	1	.....	.....	1	2
Over 100 years	.....	.....	.....	.....	.....
Not stated	4	2	4	1	11
Total	73	75	52	72	272

SUMMARY.

Number of counties reporting	17
Total census population of said counties	201,052
Total number of births reported	241
Number of marriages reported	157
Number of deaths reported	272
Death rate per 1,000 per annum	16.24
Birth rate per 1,000 per annum	14.39
Number of deaths under five years of age	108

MEDICAL PRACTICE IN CONNECTICUT.

Here is the reply sent to a doctor inquiring of a State official if he would be allowed to practice in Connecticut by registering his name and the college from which he was graduated:

"SIR: Anybody can practice medicine in Connecticut. You do not need to register; you do not need a medical diploma; you do not need to know the difference between opium and peppermint; you do not, indeed, need to know anything. You can simply come and live here and begin to practice. The laws of Connecticut will sustain you in collecting your fees for professional services, if you render any which you choose to call such. But if you undertake to carry me or my trunk to the depot for pay, you must get a license. If you peddle matches or peanuts you must get a license. If you collect the swill from your neighbors, to feed your pigs, you must get a license. If you want to empty your cesspool you must get a license. But you can practice medicine in Connecticut *without a license*."—Hartford Post.

Digitized by Google

FLORIDA STATE BOARD OF HEALTH.

AUGUST, 1891.

Deaths occurring in the seventeen counties and two cities of the State of Florida, below enumerated, during August, 1891, classified by diseases. Total census population, 208,480 Birth rate per 1,000 per annum, 15 93 Death rate per 1,000 per annum, 13.83. Ages of decedents. Other statistical

DISEASES.	Alachua.	Columbia.	DeSoto.	Escambia.	Franklin.	Hillsborough.	Manatee.	Marion.	Monroe.	Orange.	Osceola.	Polk.	Putnam.	St. Johns.	Volusia.	Jacksonville.	Pensacola.	Total.
Alcoholism						1												1
Abscess, not stated	1								2									4
Accident										1						3		3
Apoplexy									1									1
Asthma			1															1
Bowels, Congestion of	1	3					1	1										6
Bright's Disease										1								1
Bronchitis									1		1							2
Cancer of Oesophagus									1									1
Cerebral Congestion						1					1		2					4
Cerebral Softening															1			1
Child Birth								1										1
Cholera Infantum		1	3	2	1	2			2							3	1	15
Chlorosis						1												1
Consumption	1	1		1		2			4	1		1		1		6	1	19
Convulsions									2							1	1	4
Croup						1												1
Cystitis																1		1
Dentition									1							4		5
Diarrhœa																	1	1
Dropsy									1							1		2
Drowned					1	1				3							1	6
Enteritis								1	3									4
Epilepsy								1										1
Fever, Malarial	1		1			1		1	1	1					2	11		19
Fever, Typhoid	2	2		1	2	2			3					1		1	7	21
Gastro Enteritis																3		3
Hepatatis																	1	1
Heart Disease									3							2	2	7
Hemorrhage, Umbilical									1		1					1		3
Hydrocephalus																	1	1
Inanition																	2	2
LaGrippe							1											1
Liver, Cirrhosis of															1			1
Marasmus									4							2		6
Measles									2									2
Meningitis						2			5							1		8
Metritis						1												1
Paralysis				1					1									2
Peritonitis										1								1
Pertussis									2									2
Pneumonia						1			2								2	5
Poisoned					1											1		2
Poisoned, Morphine														1				1
Rachitis									1									1
Scrofula										1								1
Senile Decay				2					4							2		8
Still-birth						2			2		1		2					7
Syphilis																2		2
Teething																	2	2
Tetanus				2					1	2							2	7
Trismus, Nascentium									4							1		5
Uræmia																	1	1
Vermes						1												1
Wound, Gunshot										1								1
Cause not given		3	1	1						2		1				1	1	10
Total	6	10	7	9	5	17	2	5	52	14	4	2	4	3	4	49	24	217

Digitized by Google

DEATHS—AGES.

AUGUST, 1891.	White.		Colored.		Total
	M.	F.	M.	F.	
Under one year	14	11	14	18	57
Between 1 and 5	10	11	6	11	38
Between 5 and 10	2	2	2	.....	6
Between 10 and 15	4	1	.....	1	6
Between 15 and 20	3	5	..	4	12
Between 20 and 25	4	2	1	4	11
Between 25 and 30	5	4	2	2	13
Between 30 and 40	9	5	6	2	22
Between 40 and 50	8	1	1	2	12
Between 50 and 60	6	3	6	2	17
Between 60 and 70	5	1	3	.....	9
Between 70 and 80	3	1	4	1	9
Between 80 and 90	1	1	.....	1	3
Between 90 and 100	.....	.....	.....	.....	.....
Over 100 years	.....	....	1	1	2
Not stated	.....	.....	.....	.....	.....
Total	74	48	46	49	217

SUMMARY.

	1891.
Number of counties reporting	17
Number of places reported from	63
Number of births reported	269
Number of marriages reported	144
Number of deaths reported	217
Number of deaths under five years old	93
Number of deaths over 70 years old	13

Returns from Escambia, Marion and Orange counties exhibit marked improvement. Bradford, Brevard, Clay. Dade, Duval, Lake, Nassau and Wakulla counties failed to render reports for this month. Hillsboro County made no returns on Form No. 6.

Some comment has been made by sanitary journalists upon the number of cases of consumption reported in this State. It is believed that if the counties would show the nativity of those dying from this disease, with the length of their residence in Florida, it would be seen that a number of the deaths reported from consumption are not chargeable to the climate of this State. Of the nineteen deaths reported this month, seven were residents of Florida but a short time.

"The Supreme Court of Iowa, when ruling with regard to the collection of Vital Statistics, said: 'A physician should honestly obtain and report all information required by the regulations and statute of the State Board of Health. This is his duty as a citizen, and is imposed as an obligation by the ethics of the useful and honorable profession of which he is a member.'"

In filling out blanks care should be taken to insert all the information called for on the forms; the word "none" or an "0" should always be written where that expresses the truth—simply leaving blank conveys the impression that you were unable to supply the data. Place all reports from this office on file.

JOSEPH Y. PORTER,
State Health Officer.

Jacksonville, Fla, September 15th, 1891.

Digitized by Google

FLORIDA STATE BOARD OF HEALTH.

SEPTEMBER, 1891.

Deaths occurring in the seventeen counties and two cities of the State of Florida, below enumerated, during September, 1891, classified by diseases. Total census population, 208,529. Birth rate per 1,000 per annum, 16.29. Death rate per 1,000 per annum, 12.37. Ages of decedents. Other statistical data.

DISEASES.	Alachua.	Columbia.	DeSoto.	Duval.	Escambia.	Franklin.	Hillsborough.	Lake.	Leon.	Marion.	Monroe.	Orange.	Osceola.	Polk.	Putnam.	St. Johns.	Volusia.	Jacksonville.	Pensacola.	Total.
Abortion	1																			1
Accident	1			1																2
Anæmia														1						1
Appoplexy	1																	1	1	3
Asphyxia											1									1
Asthemia																			1	1
Bowels, Inflammation of							1			1										2
Bright's Disease						1			1									1		3
Bronchitis																		1		1
Burns						2														2
Cancer, Womb							1													1
Cancer, not stated																		1	1	2
Catarrh																			1	1
Cerebral Congestion											1							1		2
Child-birth			1		1											1			1	4
Cholera Infantum									1		1							1	2	5
Colic	1																			1
Congestion, Stomach																			1	1
Congestion		1																		1
Consumption	2			1	1		2	1	1	1	7				1			7	1	25
Convulsions					1	2									1				2	6
Defective Vitality											4									4
Dentition																		1	1	2
Diarrhœa							1					1						2	1	5
Dropsy							1				1							5		7
Encephalitis																			1	1
Enteritis											2	1						1	3	7
Entero Colitis												1						1		2
Epilepsy																			1	1
Exhaustion										1										1
Fever, Malarial	1			1	1			2	2					1				6		14
Fever, Puerperal		1									1									2
Fever, Typhoid	1					1									1			4	3	11
Gangrene											1									1
Heart Disease	1				2		1				3					1	1	4	1	14
Hepatitis																		1		1
Hydrocephalus																	1			1
Hydrothorax																		1		1
Hyperemesis							1													1
Inanition																		1	1	2
Lungs, Congestion											1							1		2
Marasmus								1			4									5
Malformation	1																			1
Measles											1									1
Meningitis											1									1
Necrobiosis											1									1
Paralysis											2		1		1			1		5
Paresis												1								1
Peritonitis	1										1									2
Pneumonia									1									2		3
Premature Birth			2								2		1			1				6
Senile Decay					1						1					1		2	1	6
Septicæmia											1									1
Still-birth						1					5				1					7
Suicide			1				1						1							3
Syphilis											1								1	2
Tetanus							1												3	4
Trismus Nascentum											1							2		3
Ulcer, Stomach																			1	1
Vermes				1				1												2
Wounds Gunshot	2																			2
Cause not stated		4		1			1		1		1			1	1	1				11
Total	13	6	4	5	7	7	11	5	7	3	45	45	3	3	6	5	9	40	20	214

Digitized by Google

DEATHS—AGES.

SEPTEMBER, 1891.	White.		Colored.		Total
	M.	F.	M.	F.	
Under one year	13	17	12	14	56
Between 1 and 5	6	8	5	7	21
Between 5 and 10	3	2	3	1	9
Between 10 and 15				1	1
Between 15 and 20	1	1	3	4	9
Between 20 and 25	3	3	5	6	17
Between 25 and 30	4	3	5	3	15
Between 30 and 40	12	5	4	6	27
Between 40 and 50	3	4	5	4	16
Between 50 and 60	4	3	4	5	16
Between 60 and 70	4	2	4	3	13
Between 70 and 80	1	1	2	2	6
Between 80 and 90	1	1			2
Between 90 and 100					1
Over 100 years			1		
Not stated		3	1	1	3
Total	74	48	46	49	214

SUMMARY.

Number of counties reporting	17
Total census population of said counties	208,529
Number of births reported from said counties	290
Number of marriages reported from said counties	156
Number of deaths reported from said counties	214
Death rate per 1,000 per annum	12.37
Birth rate per 1,000 per annum	16.69
Number of deaths by violence	9
Number of deaths under five years age	77

VACCINATION.

Surgeon Parke, who accompanied Stanley's Emin Pasha relief expedition, brings back with him an additional proof of the value of vaccination Before the expedition started the majority of the men were vaccinated by the doctor. In the wilds of Africa an epedemic of small-pox broke out and only four of the vaccinated men were attacked by the disease, and none died, while the camp followers, who had not been vaccinated, took the disease in its most virulent form and died in great numbers.—American Lancet.

WHAT IS A NUISANCE?

At common law a nuisance is deemed to be anything wrongfully done or permitted, which injures or annoys another in the enjoyment of his legal rights. Every person has the legal right to the fullest enjoyment of his life and health Anything, therefore, which injures or annoys an individual or the public in the enjoyment of life or health is a nuisance.

Under the act creating County Boards of Health, such boards have the power, and it is made their duty, to cause the abatement of nuisances affecting the life and health of the people within their jurisdiction.

"Sanitation is next to the preaching of the Cross, man's supremist duty. To convince a single person that a given disease is avoidable may save a human life. To convince him that the disease is contagious may prevent a widespread epidemic. To convince the people of a State that disease may not only be avoided but actually exterminated, means a lowering of the death rate by numbers which are little short of miraculous."

DR. ED. F. NELSON

Digitized by Google

FLORIDA STATE BOARD OF HEALTH.

OCTOBER, 1891.

Deaths occurring in the sixteen counties and two cities of the State of Florida, below enumerated, during October, 1891, classified by diseases. Total census population, 213,408. Birth rate per 1,000 per annum, 11.08; death rate per 1,000 per annum, 12.66. Ages of decedents. Other statistical data.

DISEASES.	Alachua.	Columbia.	DeSoto.	Escambia.	Franklin.	Hillsborough.	Lake.	Manatee.	Marion.	Monroe.	Polk.	Putnam.	Orange.	Santa Rosa.	St. Johns.	Volusia.	Jacksonville.	Pensacola.	Total.
Accident	..	..	..	1	..	..	..	..	..	..	..	..	..	..	..	..	1	1	3
Apoplexy	..	..	..	1	..	1	1	..	..	1	..	..	..	..	..	..	1	..	5
Asthma	..	..	..	..	..	..	..	..	..	1	..	..	..	..	..	..	..	..	1
Bowels, Inflammation	..	..	..	..	..	..	..	1	..	..	..	..	..	..	..	..	1	..	2
Bright's Disease	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	1	..	2
Bronchitis	..	..	..	..	..	..	..	..	..	..	..	..	1	..	..	..	..	..	1
Catarrh	..	..	..	..	..	..	..	..	..	..	..	1	..	..	..	..	..	..	1
Cerebral Congestion	..	..	..	..	..	..	..	..	..	2	..	..	..	..	..	..	..	..	2
Cerebral Softening	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	..	1
Child-birth	..	..	..	..	..	..	..	1	1	..	..	..	..	..	..	..	..	..	2
Cholera Infantum	..	..	1	..	2	..	..	..	1	2	2	..	..	..	..	..	1	..	9
Congestion	..	..	1	1	..	..	..	..	..	..	..	..	..	1	..	..	..	..	3
Consumption	2	1	..	2	..	3	..	..	..	4	..	..	2	..	..	..	7	3	24
Convulsions	..	..	..	..	..	..	..	..	..	..	..	..	1	..	..	..	1	..	2
Croup	..	..	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1
Defective Vitality	..	..	..	..	..	..	..	..	..	4	..	..	..	..	..	..	..	..	4
Delirium Tremens	..	..	..	..	..	..	..	..	..	1	..	..	..	..	..	..	..	..	1
Diarrhœa	..	..	..	1	1	..	..	..	..	..	..	..	1	..	..	..	1	..	4
Diphtheria	..	..	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1
Dropsy	..	..	..	..	..	..	..	..	..	1	..	..	..	..	..	..	1	1	3
Enteritis	..	..	..	..	..	..	..	..	..	1	..	..	1	..	..	..	..	1	3
Entero Colitis	..	..	..	..	..	..	..	..	..	1	..	..	1	..	..	..	..	..	2
Erysipelas	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	1
Exhaustion	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	1
Fever, Malarial	..	..	1	1	..	..	..	..	2	..	..	..	..	1	..	..	1	..	6
Fever, Typhoid	..	..	..	..	..	1	..	..	1	1	..	..	..	..	..	..	2	4	9
Hepatatis	1	..	..	..	..	..	..	..	..	2	..	..	..	..	..	..	..	..	3
Heart Disease	1	..	..	..	..	1	..	..	1	2	1	1	..	..	..	..	1	3	11
Hydrocephalus	..	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1
Inanition	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	1	1	1	4
Jaundice	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	..	1
Laryngitis	..	..	..	..	..	..	..	..	..	1	..	..	..	..	..	..	..	..	1
Liver, Cirrhosis of	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	2
Liver, Disease of	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	1	2
Marasmus	..	..	1	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..	2
Meningitis	..	..	..	..	..	1	..	..	..	2	..	..	1	..	..	..	..	..	4
Necrobiosis	..	..	..	..	..	..	..	..	..	2	..	..	..	..	..	..	..	..	2
Paralysis	..	..	..	..	..	..	..	..	..	1	..	..	1	..	..	..	4	..	6
Paraphelegia	..	..	..	..	..	..	..	..	..	..	..	1	..	..	..	..	..	..	1
Peritonitis	1	..	..	..	..	..	..	..	..	1	..	..	..	..	..	..	..	..	2
Pertussis	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1
Poison, Opium	..	..	..	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..	1
Pneumonia	..	..	..	..	..	1	..	..	..	1	2	..	..	..	..	..	..	..	4
Puerperal Hemorrhage	..	2	..	..	..	..	..	..	2	..	..	1	..	1	..	..	..	1	7
Rupture, Womb	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	1
Senile Decay	1	..	..	3	..	1	..	..	1	1	..	..	..	..	..	..	5	2	14
Septicæmia	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	1
Still-birth	1	..	..	..	..	..	..	..	..	5	1	2	..	..	..	..	..	..	9
Suicide	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	..	..	..	1
Syphilis	..	..	..	..	..	..	..	..	..	1	..	..	..	1	..	..	..	..	2
Tænia	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	1
Tetanus	..	..	..	..	..	..	..	..	..	1	..	..	..	..	..	..	..	1	2
Trismus Nascentium	..	..	..	..	..	..	..	..	..	4	..	1	..	1	..	..	1	1	6
Ulcer, Stomach	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1
Uræmia	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1
All other causes	1	2	1	..	1	..	1	3	..	..	1	..	..	..	1	..	1	..	12
Totals in each county	11	5	6	12	4	9	1	3	15	44	5	7	9	5	3	2	38	21	197

Digitized by Google

DEATHS—AGES.

OCTOBER, 1891.	White.		Colored.		Total
	M.	F.	M.	F.	
Under 1 year	17	15	9	17	58
Between 1 and 5	4	4	1	5	14
Between 5 and 10	1	2	1	2	6
Between 10 and 15	.....	.....	.....	2	2
Between 15 and 20	2	3	1	2	8
Between 20 and 25	2	7	6	2	17
Between 25 and 30	1	1	1	3	6
Between 30 and 40	6	6	4	.....	16
Between 40 and 50	9	6	2	1	18
Between 50 and 60	2	1	2	1	6
Between 60 and 70	7	6	2	4	19
Between 70 and 80	3	5	1	1	10
Between 80 and 90	2	7	4	1	14
Between 90 and 100	1	.....	1	1	3
Over 100 years	.....	.....	.....	.....	.....
Not stated	.....	.....	.....	.....	.....
Total	57	63	35	42	197

SUMMARY.

Number of counties reporting	16
Number of places reporting	56
Number of births reported	256
Number of marriages reported	225
Number of deaths reported	197
Number of deaths under five years old reported	67
Number of deaths between fifty and sixty reported	6
Number of deaths between sixty and seventy reported	15
Number of deaths between seventy and eighty reported	15
Number of deaths between eighty and ninety reported	14
Number of deaths between ninety and one hundred reported	2

The following counties failed to render proper returns: Baker, Bradford, Brevard, Calhoun, Citrus, Clay, Dade, Duval, Gadsden, Hamilton, Hernando, Holmes, Jackson, Jefferson, Lafayette, Lee, Leon, Liberty, Madison, Nassau, Pasco, Sumter, Suwannee, Taylor, Walton and Washington.

In the city of Key West, Monroe county, out of the 44 deaths reported, 25 of them were under 25 years of age.

Of the 24 deaths reported from consumption, only 7 were properly residents of Florida; several being in the State but a few months.

It is earnestly requested of all who have returns of deaths to make that they be careful to report the same to the best nomenclature at their command.

Reliable Vaccine Virus can be had at the office of the State Board of Health by applying for it. The virus is supplied to this Board at sixty dollars per thousand points, and will be furnished at this rate on application. Nothing less than ten points sold.

JOSEPH Y. PORTER, M D.,
State Health Officer.

November 15th, 1891.

Digitized by Google

FLORIDA STATE BOARD OF HEALTH.

NOVEMBER, 1891.

Deaths occurring in the fifteen counties and two cities of the State of Florida, below enumerated, during November, 1891; classified by diseases. Total census population, 200,677. Birth rate per 1,000 per annum, 13.46. Death rate per 1,000 per annum, 14.23. Ages of decedents. Other statistical data.

DISEASES.	Alachua.	DeSoto.	Escambia.	Franklin.	Hillsborough.	Lake.	Marion.	Monroe.	Orange.	Osceola.	Polk.	Putnam.	St. Johns.	Santa Rosa.	Volusia.	Jacksonville.	Pensacola.	Total.
Accident	1																2	3
Apoplexy			1		1		1									1	1	5
Asphyxia								1			1							2
Bright's Disease	1				1								1					3
Bronchitis									1					1		1		3
Cancer, Uterine																	1	1
Cancer, not stated					1												1	2
Catarrh												1	1			1	1	4
Cerebral Congestion									1								1	2
Cerebral Softening																	1	1
Cholera Infantum	1				2													3
Cholera Morbus								1								1		2
Congestion				1							1					1		3
Consumption	1				4	2	2	1		1	1	1			2	9	2	32
Convulsions						2					1					1		4
Croup				1												1		2
Cyanosis																1		1
Cystitis																1		1
Defective Vitality								1								1		9
Dentition							1									1		2
Diarrhœa					2		2						1			3		8
Diphtheria								1										1
Dropsy	1				2									1		2	2	9
Eclampsia								1									1	2
Encephalitis										1								1
Endocarditis								1										1
Enteritis							3	1								3		7
Entero Colitis					1											2		3
Epilepsy							1											1
Fever, Malarial	1		2	1			2											6
Fever, Typhoid	2			1	1	2		1						1		4	1	13
Gastro Enteritis							1	1										2
Hepatatis							1									1		2
Heart Disease			1				1	1					3			3	2	11
Hemorrhage, Umbilical							1											1
Hemorrhage, Uterine									1									1
Hemorrhage, not stated							1	1										2
Hernia																	1	1
Hydarthrus	1																	1
Hydrothorax					1													1
Inanition												1					2	3
Insanity							1											1
Laryngitis					1													1
Lungs, Congestion of					1													1
Marasmus								3										3
Meningitis								2								4		6
Myelitis																1		1
Nephritis																2		2
Paralysis												1				2		3
Placenta Prævia																1		1
Peritonitis							1											1
Pneumonia			1				1	2	1	1				5		1		10
Puerperal Hemorrhage					1													1
Scrofula																1		1
Senile Decay			3		1		1	1								1	2	9
Septicæmia	1												1		1			3
Still-birth	1							3					1					5
Stomatitis								1										1
Suicide																	1	1
Syphilis	1																	1
Tetanus			1															1
Trismus Nascentium								4	1								1	6
Tumor, of Breast								1										1
Ulcer, of Stomach							1											1
Wounds, Railroad Cars													1	1				2
Wounds, Gunshot	2								1									3
Cause not stated	1	2						2			1	1	3					10
Total	15	2	9	4	20	7	13	43	9	4	5	4	13	7	3	51	23	238

Digitized by Google

DEATHS—AGES.

NOVEMBER, 1891.	White.		Colored.		Total
	M.	F.	M.	F.	
Under one year	19	23	14	12	68
Between 1 and 5	5	3	3	1	12
Between 5 and 10	2	1	2	1	6
Between 10 and 15	2	1			3
Between 15 and 20	2		5	4	11
Between 20 and 25	2	1			3
Between 25 and 30	7	4	3	3	17
Between 30 and 40	8	4	5	6	23
Between 40 and 50	6	5	5	2	18
Between 50 and 60	6	4	1	4	15
Between 60 and 70	12	3	3	1	19
Between 70 and 80	4	6	1	3	14
Between 80 and 90		1	1	2	4
Between 90 and 100	1	1			2
Over 100 years					
Not stated	7	7	2	7	23
Total	83	64	45	46	238

SUMMARY.

Number of counties reporting	15
Number of births reported	218
Number of marriages reported	163
Number of deaths reported	238
Number of deaths under five years of age reported	80
Number of deaths by violence	9

Digitized by Google

FLORIDA STATE BOARD OF HEALTH.

DECEMBER, 1891.

Deaths occurring in the twelve counties and two cities of the State of Florida, below enumerated, during December, 1891, classified by diseases. Total census population, 182,398. Birth rate per 1,000 per annum, 17.11; death rate per 1,000 per annum, 11.58. Ages of decedents. Other statistical data.

DISEASES.	Alachua.	DeSoto.	Escambia.	Lake.	Marion.	Monroe.	Orange.	Osceola.	Polk.	Putnam.	Santa Rosa.	Volusia.	Jacksonville.	Pensacola.	Total.
Accident					1							1			1
Apoplexy		1				2	2								5
Asphyxia									2						2
Bright's Disease										2			1		3
Bronchitis											1		5	1	7
Burns							1								1
Cancer, Womb														1	1
Catarrh						1								1	2
Cerebral Congestion														1	1
Child Birth					1										1
Consumption						2	3		2	2			14	2	25
Convulsions				1									2	2	5
Cyanosis							1								1
Defective Vitality						2							1		3
Diarrhœa				1	1	1	1	1	1				1		6
Dropsy					2	2									4
Drowned									1	1	1		2		5
Enteritis	1					1									2
Entero Colitis						3									3
Epilepsy							1						1		2
Emphysema						1									1
Fever, Malarial		2					1	1		1					5
Fever, Typhoid					1								4	4	9
Gastro Enteritis	1					1	1						1		3
General Debility													1		1
Hepatitis	1														1
Heart Disease						2							2	1	5
Hemorrhage, Arterial													1		1
Hemorrhage, Cerebral									1						1
Hemorrhage, Umbilical									1						1
Inanition														2	2
Influenza						2									2
Liver, Cirrhosis of						1									1
Lungs, Congestion of										1			1		2
Lungs, Gangrene of													1		1
Marasmus						1							1		2
Meningitis						2									2
Myelitis													1		1
Oedema of Glottis													1		1
Paralysis										1					1
Peritonitis			1	1									1	1	4
Pericarditis													1		1
Pneumonia		2			1		1					1	3	2	10
Puerperal Hemorrhage	1					1	1								2
Premature Birth															1
Rheumatism													1		1
Senile Decay			1		1		3								5
Septicæmia														1	1
Still-birth					1	4				1					6
Stomatitis														1	1
Syphilis										1					1
Tetanus										1				1	2
Trismus Nascentium						6								2	8
Tumor, not stated	1														1
Ulcer, of Bowels									1						1
Wounds, Gunshot					1										1
Cause not stated	1				1			1		1			2		6
Total in each county	5	5	2	3	11	35	16	3	9	12	3	1	48	23	176

Digitized by Google

DEATHS—AGES.

DECEMBER, 1891.	White.		Colored.		Total
	M.	F.	M.	F.	
Under 1 year	15	12	20	8	55
Between 1 and 5	1	3	5	1	10
Between 5 and 10	1	2	2	1	6
Between 10 and 15					
Between 15 and 20	1	1		2	4
Between 20 and 25		2	2	2	6
Between 25 and 30	5	4	3	5	17
Between 30 and 40	7	3	8	7	25
Between 40 and 50	5	5	5	1	16
Between 50 and 60		2	1		3
Between 60 and 70	7	3	3	6	19
Between 70 and 80	4	5	1	1	11
Between 80 and 90		1	1		2
Not stated					2
Totals	48	43	51	34	176

SUMMARY.

Number of counties reporting	12
Number of births reported	247
Number of marriages reported	235
Number of deaths reported	176
Number of deaths under 5 years reported	65
Number of deaths by violence	9

The following counties, usually very prompt, failed to make returns: Franklin, Hillsborough and St. Johns.

Reports are not complete unless they show births and marriages. Secretaries will confer a favor by always including this information.

"Heart failure" should be refused acceptance as a cause of death. Certificates so filled out should be returned with a request for information as to real cause of death.

A new vaccination law goes into effect in Italy on January 1st, 1892. All children except those who have already had small pox, or who are medically certified to be in ill health, must be vaccinated within the solar half year subsequent to the date of their birth; and where renewal of any such certificate of unfitness is in question, the child must be inspected by the official vaccinator with whom the final decision will rest.

JOSEPH Y. PORTER,
State Health Officer.

Jacksonville, Fla., January 15th, 1891.

Digitized by Google

FLORIDA STATE BOARD OF HEALTH

YEAR 1891.

Deaths occurring in the twenty-three counties and two cities of the State of Florida, below enumerated, during the year 1891, classified by diseases. Birth rate per 1,000 per annum, 14.72; death rate per 1,000 per annum. 13.22.

DISEASES.	Alachua.*	Brevard.	Columbia.	DeSoto.	Duval.*	Escambia.	Franklin.	Hillsborough.	Lake.	Leon.	Levy.	Manatee.	Marion.	Monroe.	Nassau.*	Orange.	Osceola.	Polk.	Putnam.	St. Johns.*	Santa Rosa.*	Taylor.	Volusia.	Jacksonville.	Pensacola.	Total.
Abortion	1														1											1
Abscess, Bowels																1										1
Abscess, Cerebral																										1
Abscess, Liver														1												1
Abscess, not stated	1													2							1		1			7
Accident	2			1	1	4		2	2				4		2	2	1	1					1	5	3	30
Alcoholism								2								1				1					1	5
Anæmia																		1								1
Angina Pectoris	1													1		1			1							5
Apoplexy	1			1		2	1	3	1	1			1	7		2				5			1	9	4	39
Ascites																						1				1
Asphyxia														2				3								5
Asthenia	1															1								3	1	5
Asthma				2				2						1		1								2		5
Blood Poisoning				1															1	1				2		5
Bowels Congestion of	2		3						1			1	2		1	3	1							1		15
Bowels, Inflammation					1			2				1	2						1					4		11
Bright's Disease	2			1		1		2		1						2			2	6				7	3	27
Bronchitis								1					1	2		1	1			2	3		2	14	3	30
Burns	1	1				2							2			1			1							8
Cancer, Liver																	1									2
Cancer, Œsophagus														1												1
Cancer, Stomach		1														1								3		5
Cancer, Testicles																				1						1
Cancer, Womb								1																	2	3
Cancer, Uterine																									4	4
Cancer, not stated			1					1					2			3	1						1	2	5	16
Catarrh					1									1					2	1				1	3	9
Cerebral Concussion											1															1
Cerebral Congestion	2							2		1			4	6	1	1	2		3	1				6	6	35
Cerebral Meningitis						1														1						2
Cerebral Softening																				1			2	1	2	6
Child-birth				1	1	1		1				1	6		1			1		1				1	2	17
Chlorosis								1																		1
Cholera Infantum	1		3	4	1	2	3	8		2	1		2	6		1		2		2				9	3	50
Cholera Morbus														1						1				1		3
Chorea								1																		1
Colic	1													3												4
Congestion of Stomach														1											1	2
Congestion	1		1	1		1	1									1		1						1	3	11
Consumption	16	1	2		11	7		30	6	1			13	39	10	17	3	7	12	12	1		9	112	21	342
Convulsions					1	1	3		5	1			1	3	1	3		1	2	2		1		12	7	44
Croup						1	1	1								1								1		5
Cyanosis																1								1		2
Cystitis																							1	3		4
Defective Vitality					2								1	18		1								2		24
Delirium Tremens														1												1
Dentition					3								1	1	1									13	1	18
Diarrhœa	3				1	1	1	11	1				5	1	1	8	4	1	5	3				15	8	69
Diphtheria						1													1							4
Dropsy	1		1		5	3		6		1			2	6			1	2			1			14	7	50
Drowned					2	1	2	4						1		4	1	1	2		1		1	3	5	28
Eclampsia									1					4											1	6
Eczema			1																							1
Encephalitis					1				1								1								1	4
Endo-Carditis														1										1		2
Enteritis	1						1	2					1	12		8								13	4	37

(*Continued on Next Page.*)

Digitized by Google

FLORIDA STATE BOARD OF HEALTH.

[YEARLY REPORT CONTINUED,]

DISEASES.	Alachua.*	Brevard.	Columbia.	DeSoto.	Duval.*	Escambia.	Franklin.	Hillsborough.	Lake.	Leon.	Levy.	Manatee.	Marion.	Monroe.	Nassau.*	Orange.	Osceola.	Polk.	Putnam.	St. Johns.*	Santa Rosa*.	Taylor.	Volusia.	Jacksonville.	Pensacola.	Total.
Entero Colitis	2							5						5		2				1			3	5		23
Epilepsy													1	1		1									1	6
Exhaustion													1											1		2
Emphysema														1												1
Empyema																								1		1
Erysipelas													1											1		2
Fever, Congestive										1			1				1							2		5
Fever, Malarial	3			6	1	5	1	3	3	4			8	6		8	1	2	2	1	1		4	28		87
Fever, Puerperal			1	2	1			1	1	1				2	1									1		11
Fever, Typhoid	1		4	1	5	4	4	12		3	2		7	26		3	1		3	2			1	34	39	161
Fever, Yellow†						1									1											2
Fracture of Skull																				1				1		2
Gangrene														1										1		2
Gastritis								2		1	1		1	1										2	1	9
Gastro Enteritis				1				2									2							7		14
General Debility																			1					1		2
Hæmoptysis																								1		1
Heart Disease	5			1	1	4	1	8		6			5	12		5		2	4	15		1	1	20	17	108
Hemorrhage, Arterial																								2		2
Hemorrhage, Bowels	1																									1
Hemorrhage, Cerebral	1																		1					1		3
Hemorrhage, Lungs																					1			1	1	3
Hemorrhage, Puerp'al	1		2										2	1					1		1			2	1	9
Hemorrhage, Umbilic'l														2				1								6
Hemorrhage, Uterine		1			2												1									3
Hemorrhage, not stat'd	1												1	1											1	5
Hepatitis	2							2						3										2	1	10
Hernia																									1	1
Homicide														1			1								2	4
Hydarthrus	1																									1
Hydrocephalus				1																				1	1	3
Hydrothorax								1																	1	2
Hyper-Emesis								1																		1
Inanition								5						1					1	5			3	7	11	33
Inflammation, Navel	1																									1
Influenza								1		1				2		1								1		6
Insanity														1					1							2
Internal Obstruction						1																				1
Intussusception														1												1
Jaundice								1																2		3
Kidney, Disease of														1												1
Kidney, Inflammation									1																	1
LaGrippe	1				1			3				1	3			3	1	1	1			1				16
Leprosy																									1	1
Lightning																		1			1					2
Liver, Congestion of													1											2		3
Liver, Cirrhosis of	1													1									1	2		5
Liver, Disease of																			1							1
Locomotor Ataxia															1											1
Lungs, Congestion of					1			2	1				2	1	2			1	2			1	5			18
Lungs, Gangrene of																								1	1	2
Laryngitis								1						1												2
Malformation	1																									1
Marasmus					2			3	1					25	1	3				2				27	1	65
Malarial Taxemia				2																						2
Measles								2					4	7	2					1						16
Meningitis					1			5		1				20			2	1						11	2	43
Metritis								1																		1
Myelitis																								3		3
Nephritis											1													8		9
Necrobiosis															3											3

†One of these deaths from yellow fever was the master of the American schooner Warren Adams, who died on board his vessel at the lower quarantine station, Fernandina, during the month of December. The other case is that of the second engineer of the steamship Nigretia, who died at the Pensacola quarantine station.

(*Continued on Next Page.*)

Digitized by Google

FLORIDA STATE BOARD OF HEALTH.

[YEARLY REPORT CONTINUED.]

DISEASES.	Alachua.*	Brevard.	Columbia.	DeSoto.	Duval.*	Escambia.	Franklin.	Hillsborough	Lake.	Leon.	Levy	Manatee.	Marion.	Monroe.	Nassau.*	Orange.	Osceola.	Polk.	Putnam.	St. Johns.*	Santa Rosa.*	Taylor.	Volusia.	Jacksonville.	Pensacola.	Total.
Œdema Glottis																								1		1
Paralysis	2			1	1	3	2	1			1			5	1	3	2		4	2			1	12	3	44
Paresis																1									1	2
Paraplegia																		1								1
Parotitis																				1						1
Peritonitis	3					2			1				1	2			1			1			1	5	1	18
Pericarditis	1																							1		2
Pertussis	1													3		1			1							6
Phlebitis															1											1
Placenta Prævia																								1		1
Pneumonia	9	1		2	2	9	2	8		3			13	10	4	3	1		5	3	6	3	1	27	21	133
Poisoned, Morphine																										1
Poisoned, Opium													1											1		2
Poisoned, not stated							1																		1	2
Poisoning, Septic																	1									1
Premature Birth				2	1			2					4	4		1	1			4						19
Rachitis														5												5
Rheumatism						1		1																2		4
Rupture, Bladder																										
Rupture, Blood Vessel								1																		1
Rupture, Womb																								1		1
Sarcoma of Shoulder																								1		
Scrofula						1								1		1								1		4
Senile Decay	2			1	4	12	1	8		3			11	11	2	4			2	4	1			22	11	99
Septicæmia	1													3						1			1	1	1	8
Snake Bite																1							1			2
Spina Bifida																	1									1
Still-birth	3				1	2		8	1				2	21		1	4	1	10	7		2		17	3	83
Stomatitis														1											1	2
Stricture																1										1
Stricture, Bowels									1																	1
Suicide				1				2									1			1					1	6
Sunstroke														1												1
Syphilis	1													2					1		2			3	1	10
Tænia																								1		1
Tetanus						3		1						8		2			2	1				5	12	34
Thrush								1									1									2
Tonsilitis																								1		1
Trismus Nascentium										1				21		1								11	5	39
Tumor, Breast														1												1
Tumor, Bowels																								1		1
Tumor, Ovarian																									1	1
Tumor, Stomach																										
Ulcer, Bowels										1								1	1					1		4
Ulcer, Stomach													2												1	3
Ulcer, Throat													2													2
Uræmia	1															1								1	2	5
Vermes					1			1	1															1		4
Wounds, Crushed					2								1							1	1					5
Wounds, Gunshot	4				1		3	1					1			2				1		1			1	14
Wounds, Knife	1																									1
Wounds, not stated																									1	1
Cause not known	5	1	10	12	8		1	14	2	4		1	6	4	4	6	5	8	10	5	1	2	1	15	5	130
Total	103	6	29	51	68	72	32	10[illegible]	30	40	6	5	132	85	4	40	122	42	39	87	105	22	12	59	58	25[illegible]

*Reports from the counties of Alachua for April; Duval for January April, August, October, November and December; St. Johns county for December, and Santa Rosa county for August and September were received too late to be included in the Monthly Bulletin for these months, but are embraced in the yearly consolidated report.

Digitized by Google

DEATHS—AGES.

	White.		Colored.		Total
	M.	F.	M.	F.	
Under 1 year	155	157	131	158	601
Between 1 and 5	49	49	47	55	200
Between 5 and 10	16	16	15	13	60
Between 10 and 15	10	8	1	13	32
Between 15 and 20	24	23	21	34	102
Between 20 and 25	37	30	38	43	148
Between 25 and 30	48	42	36	37	163
Between 30 and 40	99	72	65	53	289
Between 40 and 50	74	43	52	29	198
Between 50 and 60	58	41	38	17	154
Between 60 and 70	74	39	29	27	169
Between 70 and 80	33	49	20	27	129
Between 80 and 90	9	19	11	8	47
Between 90 and 100	2	2	2	3	9
Over 100 years	2	1	1		4
Not stated	41	41	33	38	163
Totals	752	681	529	558	2470

DEATHS.

	Males.	Females.	Total.
White	752	681	1383
Colored	529	558	1087
Totals	1281	1189	2470

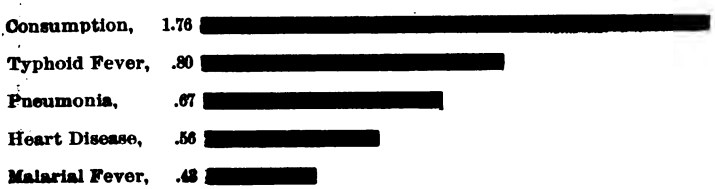
BIRTHS.

	WHITE.		COLORED.		TOTAL.
	Males.	Females.	Males.	Females.	
Legitimate	879	783	444	458	2564
Illegitimate	8	9	34	39	90
Total	887	792	478	497	2654

Operations Mullet Key Quarantine Station May to November 15th, 1891.

Steamships—American	133
Steamships—Foreign	12
Sailing Vessels—American	64
Sailing Vessels—Foreign	6
Total Tonnage	110,044
Total Number of Crews	5,278
Total Number of Passengers	2,620
Pieces of Baggage	750

Diagram showing the Comparative Mortality of the five most prominent causes of death during 1891, with percentages.



Digitized by Google

Comparative Birth and Death Rate based on Census Population, for each month of 1891, and total for whole year.

	BIRTH RATE.	DEATH RATE.
Whole year	14.72	13.22
January	15.33	16.19
February	13.49	13.04
March	16.81	12.36
April	14.66	13.23
May	11.66	11.75
June	15.93	12.64
July	14.39	16.24
August	15.93	13.33
September	16.69	12.37
October	11.08	12.66
November	13.46	14.23
December	17.11	11.56

Death Rates per annum based on Census population:

**Jacksonville, City of,	Census Population	17,201.	Death Rate		23.32
‡Monroe County,	"	18,786.	"	"	32.26
*Duval County,	"	26,800.	"	"	24.30
Pensacola, City of	"	11,750.	"	"	21.97
†Escambia County,	"	20,188.	"	"	16.35
Hillsborough County,	"	14,941.	"	"	12.94
St. Johns County,	"	8,712.	"	"	12.06
Orange County,	"	12,584.	"	"	9.78
Putnam County,	"	11,186.	"	"	7.79
Marion County,	"	20,796.	"	"	6.35
Alachua County,	"	22,984.	"	"	4.49

**The population of Jacksonville, as estimated by the City Board of Health, is 25,000; on such a basis the death rate would be 23.32.

*Whole County, including the City of Jacksonville.

‡This computation is based on reports for six months.

†Includes the City of Pensacola.

Digitized by Google

Counties that Reported During the Year 1891.

	January.	February.	March.	April.	May.	June.	July.	August.	September.	October.	November.	December.	
Alachua	‡	‡	‡	*	‡	‡	‡	‡	‡	‡	‡	‡	12
Brevard	‡	‡	....	....	....	....	....	....	....	....	....	....	2
Columbia	....	....	....	....	‡	‡	....	‡	‡	‡	....	....	5
DeSoto	‡	....	‡	‡	‡	....	‡	‡	‡	‡	‡	‡	10
Duval	*	‡	‡	*	‡	‡	‡	*	‡	*	*	*	12
Escambia	‡	‡	‡	‡	‡	‡	‡	‡	‡	‡	‡	‡	12
Franklin	‡	....	....	....	*	‡	*	‡	‡	‡	‡	*	9
Hillsborough	‡	‡	‡	‡	‡	‡	‡	‡	‡	‡	‡	....	11
Lake	....	....	....	....	‡	‡	‡	....	‡	‡	‡	‡	7
Leon	‡	....	‡	‡	‡	‡	‡	..	....	....	....	....	6
Levy	..	....	....	‡	‡	‡	‡	....	‡	....	....	....	5
Manatee	..	....	....	....	....	....	....	‡	....	‡	....	....	2
Marion	‡	‡	‡	‡	‡	‡	‡	‡	‡	‡	‡	‡	12
Monroe	..	....	....	....	‡	....	‡	‡	‡	‡	‡	‡	76
Nassau	‡	‡	....	....	‡	....	....	....	....	*	*	*	6
Orange	‡	‡	*	‡	‡	‡	‡	‡	‡	‡	‡	‡	12
Osceola	‡	‡	‡	‡	‡	‡	‡	‡	‡	....	‡	‡	12
Polk	....	....	....	‡	‡	‡	‡	‡	‡	‡	‡	‡	9
Putnam	‡	‡	‡	‡	‡	‡	‡	‡	‡	‡	‡	‡	12
St. Johns	‡	‡	‡	....	‡	‡	‡	‡	‡	‡	‡	*	11
Santa Rosa	‡	....	....	....	....	....	....	*	*	‡	‡	‡	5
Taylor	‡	*	....	‡	‡	‡	‡	....	....	....	....	....	7
Volusia	‡	‡	....	‡	‡	‡	‡	‡	‡	‡	‡	‡	12
Jacksonville	‡	‡	....	‡	‡	‡	‡	‡	‡	‡	‡	‡	12
Pensacola	‡	‡	....	‡	‡	‡	‡	‡	‡	‡	‡	‡	12

‡Means a report received.

*Means reported, but not in time for monthly buletin.

Digitized by Google

RULES FOR DISINTERMENT AND TRANSPORTATION OF THE DEAD.

RULE I. Persons dying from Diphtheria, Scarlet Fever, Smallpox, Asiatic Cholera, Leprosy, Typhus Fever, Yellow Fever, or other infectious or contagious diseases, are required to be buried or cremated within six (6) hours from time of death.

RULE II. Persons dying from all other diseases except those mentioned in the preceding rule must be interred or cremated within twenty-four (24) hours from time of death between April 15th and December 1st, and within forty-eight (48) hours between December 1st and April 15th of each year; and if embalmed for transportation under this rule, no body can be held for shipment for a period longer than twenty-four (24) hours between April 15th and December 1st, and forty-eight (48) hours between the 1st of December and the 15th of April of any year.

RULE III. It is hereby ordered that disinterring bodies for transportation to other points, or for removal from one grave to another in the same cemetery, is forbidden between April 15th and December 1st of any year, except by a special permit from the State Board of Health.

RULE IV. The disinterring of the bodies of those having died from Diphtheria, Scarlet Fever, Smallpox, Asiatic Cholera, Leprosy, Typhus Fever, Yellow Fever, or other contagious or infectious diseases, is hereby prohibited within two years from the date of death.

RULE V. The transportation of the bodies of persons dead of Diphtheria, Scarlet Fever, Smallpox, Asiatic Cholera, Leprosy, Typhus Fever, Yellow Fever, or other contagious or infectious diseases, is absolutely forbidden.

RULE VI. All bodies disinterred for transportation must be placed in an air-tight zinc, tin, copper or lead lined coffin, or in an air-tight casket, hermetically sealed (soldered), and all enclosed in a strong, tight wooden box.

RULE VII. A certificate from the attending physician setting forth the date and cause of death must, in all cases, accompany the casket containing the remains.

RULE VIII. A certificate from the County Board of Health or other health authority granting permission for the removal, and showing name of the deceased, age, place of death, cause of death, the point to which it is to be shipped and the name of the medical attendant, must in all cases accompany the casket containing the remains.

JOSEPH Y. PORTER, M. D.,
Health Officer of the State of Florida.

Adopted May 2, 1892.

Digitized by Google

Digitized by Google

INDEX.

County Boards 5–26
Correspondence Yellow Fever at Tampa 40
Correspondence Steamship "Nigretia" 41
Circular Letter Vaccination 43
County Board of Health Act 50
Diphtheria 12
Disinterring Dead Bodies 84
Finances 31–39
Fees 21–39
General Health 5–8
Health Boards 26
Inspectors 6–21
Letter of Transmittal 3
Leprosy 15
Legislation 32
Meetings 6–16
Steamship "Nigretia," case of 11–41
Office Work 33
Personnel of Board 2
Quarantine Stations 6
Quarantine Service 21
Report of President 3
Report of R. P. Daniel, ex-President 5
Report of State Health Officer 8
Relations with Other Boards 5–26
Recommendations 33
"Soli Deo Gloria," case of 10
Smallpox 11
Statistics 54
Typhoid Fever 12
Transportation of Dead 84
Vaccination 13–43
Vital Statistics 17–54
"Warren Adams," case of 11
Yellow Fever 9

Digitized by Google

Digitized by Google

Digitized by Google

FOURTH ANNUAL REPORT

OF THE

STATE BOARD OF HEALTH

OF FLORIDA.

JACKSONVILLE, MARCH 22, '93.

JACKSONVILLE, FLA.
DACOSTA PRINTING AND PUBLISHING HOUSE
1893.

Digitized by Google

THE NEW YORK
PUBLIC LIBRARY
199093
ASTOR, LENOX AND
TILDEN FOUNDATIONS.
1901

OFFICERS AND MEMBERS

OF THE

STATE BOARD OF HEALTH OF FLORIDA.

HON. W. B. HENDERSON, President, Tampa, Fla.

HON. J. P. TALIAFERRO, Jacksonville, Fla.

DR. WARREN E. ANDERSON, Pensacola, Fla.

DR. JOSEPH Y. PORTER, State Health Officer and Secretary, Key West, Fla.

Office of the Board, Jacksonville, Fla.

Digitized by Google

LETTER OF TRANSMITTAL.

TAMPA, FLORIDA, March 25th, 1893.

To His Excellency Hon. H. L. Mitchell, Governor of Florida:

SIR—The Statute requires that I should make a report to you of the annual expenditures of the State Board of Health "together with any special observations, recommendations or facts that would be conducive to the health and sanitary conditions of the State." In accordance with this requirement I transmit herewith the annual report of the Secretary and Health Officer of the Board, in which you will find tables in detail of the expenditures of the Board and other information relating to its financial management.

It is not my purpose to remark on the portion of Health Officer Porter's report, relating to Public Health and Vital Statistics of the State, during the past year, except so far as to commend the same to the careful attention of your Excellency, as embracing many interesting and instructive facts. The State Board, in a recent session, approved unanimously of the statements, reflections and recommendations of the State Health Officer, and requested that as President of the Board, and in transmitting this document, I should especially comment upon certain conditions bearing upon the continuance and success of a system which has, in the opinion of the Board, been of such great benefit to the State of Florida.

It will be remembered by your Excellency that this Board of Health commenced its efforts in the preservation of the public health of Florida, at a time when the citizens of the State, and of neighboring States, were disturbed by the occurrences of the previous years, and at a time too,

Digitized by Google

when an anxious and nervous dread pervaded the whole State, lest a repetition of the sad events, and great commercial depression of 1887 and 1888 should be repeated in in 1889. The responsibility assumed by this Board can scarcely be appreciated, except by those whose business brought them in intimate relation with the executive of the Board during the first year of its organization. Legislated into existence with no apparent support (for there was no money in the State Treasury for this especial purpose) it had as a legacy, the epidemic of the year before, with the attendant results of inefficient county quarantines, and all the horrors of shot-gun detensions, quarantine camps and the general upsetting of business interests.

It is scarcely necessary to invite comparison of the business affairs of the State today with those of four years ago. The confidence of the public now in the powers of the State Board to successfully cope with all emergencies in health matters and in the prevention of epidemics is in marked contrast to the doubt and distrust which marked the era of County Board supremacy, and it is not believed that the people of Florida wish to return to or rely alone upon that method of protecting the health and adjusting her business interests. Therefore the Board views with solicitude for the State's future commercial welfare, as well as her health preservation, a sentiment, which, in the spirit of mistaken economy, suggests the reduction of taxation by the repeal of the Statute creating the Board.

It has been suggested that a reduction in the expense in the financial management of the Board could be made by requesting the General Government to operate the quarantines of the State. Under the National Law as at present enacted it is not contemplated that the States should do this, nor is any provision made by the Treasury Department to purchase Disinfecting or Quarantine Plants from the States or municipalities. Indeed if this procedure was practicable the Board would not deem it advisable in the

Digitized by Google

interest of State self-respect and efficient management to counsel surrendering to the National Government any of the inherent rights and duties devolving upon the State. It considers that any economy of funds is false if made at the expense of capable management, for it is believed by the Board that it is better qualified to know, appreciate and make effective whatever surveillance and protection may be necessary than a Government Bureau a thousand miles or more away from the points to be watched. The State Board, deriving its authority from the people of the State, is directly responsible to them for the proper exercise of such authority, and is accordingly more interested in the health and commercial interests of the commonwealth.

Your Excellency is respectfully requested to remember that the Disinfecting Plant and Station at Mullet Key was erected with money borrowed on the private and individual pledges of the members of the Board and the State Health Officer, which money had to be returned from the appropriations of succeeding years, and when it is called to your remembrance that but fifty per cent. of the amount provided by the Legislature of 1889 for the special health fund has ever been collected, you will the more readily perceive the embarrassment which has ever confronted the Board in not having sufficient funds to erect needed disinfecting plants at other important ports of the State. I concur in Health Officer Porter's statement that the funds of the Board have been economically administered, and that no money not necessary to carry out the purposes of the Statute has been spent. I have carefully scrutinized all vouchers before affixing my signature of approval, and there has been no expenditures made without due regard to the consideration of efficiency.

While the economical management of the public funds has ever received my careful attention as President of this Board, I have equally considered the necessity for many appliances to properly fulfill the purposes of the Act. The

Digitized by Google

Board has been conscious that it could not justly expect a protective system against importation of disease without furnishing the executive officer of the Board with the means necessary to afford that protection. As a business proposition it would be as reasonable to expect skillful work from a mechanic without tools. In providing a quarantine tenerd and patrol boat for the use of the Health Officer during the quarantine season the Board has but carried out the policy instituted at its organization—economy in the careful expenditure of the public funds in all of its departments consistent with that efficiency to realize to the fullest degree the benefits accruing from good health. It is believed that the expense of management of the "Missoe" has been considerably less than that of operating similar boats in other States, and, as contributing to the success of the quarantine system, her continuance in service is essential.

The taxation of the State for health purposes is one and one-half mills on the assessable property of the citizens. It is suggested by the Board that one mill of this amount could be saved to the tax-payer, if the statute creating County Boards of Health is repealed. It is thought that the State Board of Health can, from the one-half mill tax levied for its especial health fund, better acquire statistical and sanitary information, and make use of such knowledge to the benefit of the citizens of the State, through agents showing special interest in health work, appointed in each County. In times of sickness or threatening danger from epidemic diseases, the State Board of Health is looked to by the people, and confidence is inspired by its supervision. The experience of the past three years has not demonstrated that the County Boards have been alive to the demands which the statute creating them imposes, except in a very few instances, and therefore, I believe it would be to the interest of economy and good government, to repeal the law creating them.

The quarantine administration at the several ports in

Digitized by Google

the State now operated by the County Boards should also be under one head and that head should be the State Board of Health, which is directly charged by the people of the State with the responsibility of preventing the introduction of contagious diseases through the ports, and from which everything is expected in the way of sea coast protection. Under the present division of authority on this subject between the State and County Boards it is difficult, if not impossible, to fulfill this expectation. There would result in this arrangement almost, if not quite, a self-supporting system of quarantine, by using the excess of income in quarantine fees over expenditures at the larger ports to defray the expenses over receipts at the smaller, which are none the less important ports and through which disease can be introduced.

If the measures such as I have briefly touched upon meet with the approval of your Excellency and you will note them to the Legislature, as expressing the views of the members of the State Board of Health on matters, the execution of which they are especially charged, it is thought that the members of the Legislature will give such attention to the requirements of sanitation and health which will result in judicious enactments.

W. B. HENDERSON,
President of the State Board of Health.

Digitized by Google

HEALTH OFFICER'S REPORT.

JACKSONVILLE, FLA., March 22, 1893.

To the Honorable President and Members of the State Board of Health of Florida:

GENTLEMEN:—In submitting the fourth annual report of the Secretary of the State Board of Health of Florida indulgence is asked, first, for reproducing various portions of the last annual report, since the general conditions of sanitation, quarantine, statistics and finance existing last year have not materially changed and the comments then made on the direct relations to the health and financial interests of the State are as applicable now as then and may be again, it is thought, profitably discussed. Secondly, for anticipating this report some weeks in advance of the regular date of the annual meeting, in order that your honorable body may be enabled to present to his Excellency, the Governor, the views of the Board on measures deemed necessary to preserve the health of the commonwealth, so that he may have time to consider any recommendations in his official message to the Legislature, soon to meet in biennial session.

GENERAL HEALTH.

The good health which has prevailed throughout the State for the past three years has been maintained during the past year. There have been rumors of suspicion of contagious disease in several counties, but investigation of the reports failed in every instance to confirm the "hear-says" and except in the case at Port Tampa none of the originators of malicious stories have been detected. In this case investigation led to placing the offender under bonds. At the following session of the Circuit Court he was convicted of the offence and fined. In promptly bring-

Digitized by Google

ing to justice the traducers of the health of a community, the dignity of the State is upheld and her commercial interests protected. The details of this case are given in the Appendix and is interesting as being the first conviction, under the Statute for making false reports or spreading false rumors concerning the existence of contagious disease in the State.

Cholera was reported in Dade county and at Fernandina, and Yellow Fever in St. Marks, New Smyrna and Tarpon Springs. Prompt investigation was at once instituted on each report, but the result failed to confirm the rumor. Copies of the correspondence in these cases were placed in the hands of the District Attorneys for the several judicial circuits in which these rumors originated, with the request that the facts in evidence be submitted to the several grand juries, with the view of bringing to justice those who had violated the Statute in this regard.

As a provision for the future of general health, a plea has been made to educate the youth of the State in hygiene and sanitation, through the public schools, that thus the future citizen may be prepared to adopt measures to preserve the general health and increase his business interests. It was suggested some months ago to the State Superintendent of Public Instruction that in the curriculum of study in the public and normal schools in the State provision should be made for instruction in hygiene and sanitation. An elementary treatise on this subject, in the form of a catechism of questions and short answers, prepared by Dr. J. F. Edwards of Philadelphia, was thought to be admirably adapted to the mental capacity of the average student. This text book is written in a simple, plain style, but presents an amount of useful knowledge which may induce the more studious and reflecting to pursue the subject deeper. At the suggestion of the State Health Officer a sample copy of this little work was sent by Dr. Edwards to each of the County Superintendents of Public Instruction and a circular letter

Digitized by Google

was issued by Hon. W. N. Sheats, State Superintendent of Public Instruction, calling attention to the subject and urging the Board of Instruction to adopt it in the course of study prescribed by them, because of its bearing upon the welfare of the future citizen and his happiness and prosperity.

Another method adopted by the Board to increase interest in health matters, and which has been an important work of the Board during the past year, commencing in July last, has been the publication of a little monthly bulletin, styled the "Florida Health Notes." This publication gives monthly the statistical information collected from the counties, together with short articles on popular health subjects, with extracts of interest and value from standard journals and pamphlets on hygiene and sanitation. The aim has been to keep the protection of human life from disease prominently before the people of the State—thus in touch, as it were, with the daily work of the Board.

DIPHTHERIA.

Although more general in its distribution than last year, it is believed that Diphtheria had no local focus in the State, but that in every instance it was imported from neighboring States. Only isolated cases occurred and no general prevalence, or anything approaching an epidemic in character.

TYPHOID FEVER.

From sanitary reports received it is learned that Typhoid Fever has caused 133 deaths during the year. As remarked in the third annual report, when writingon this subject, the belief is firmly expressed "that with the bettering of the hygiene and sanitary systems of the towns in the State, particularly of the larger cities, by instituting sewerage and sub-soil drainage, the abolishment of tanks for potable water storage, Typhoid Fever will notably decrease in prevalence in Florida, for it has already been noted that a better health prevails than formerly in those places in the

Digitized by Google

State where artesian water from great depth is freely used for domestic purposes, and sewerage has taken the place of the midden and bucket system." During the year the water, plumbing and sewerage system of the larger hotels at St. Augustine and Tampa (which were last year maligned by correspondents of some of the Northern press in this respect) have been thoroughly examined by expert sanitary engineers, who report that nothing defective in the sewerage systems of these structures have been found, and the cases of fever occuring last year cannot be attributed to defects therein.

In November, 1892, the following correspondence was had with the Duval County Board of Health, on the subject of the condition of the pavements of certain streets in the city of Jacksonville:

GENTLEMEN:—I desire to invite your attention to the condition of the cypress block pavement on Bay street in the city of Jacksonville, and to portions of the side streets leading into it. It is scarcely necessary to point out to you, as health officials, why the block pavement of Bay street is dangerous to life and health, and productive of disease; the facts and reasons are apparent without entering into any discussion. The possibilities of disease in the coming year, particularly Cholera, are viewed with decided apprehension by sanitarians throughout the country, and the warning is being continually and continuously made to protect the public health, and to place cities and towns in the best hygienic and sanitary condition."

"I would suggest to you that this matter of the Bay street pavement be brought to the immediate attention of the City Council of Jacksonville, and that the Council's attention be invited to the provisions of Section 12 of the Act creating the State Board of Health, which makes it the duty of the State Health Officer "to condemn in any of the said cities or towns any sidewalks, pavements, buildings, wharves or other things that, in his judgment, shall be likely to produce or cause the spread of epidemic disease," etc., etc. This duty the State Health Officer would prefer to avoid the execution of, if possible, and trusts that it may be only necessary to invite, through your Board, the atten-

Digitized by Google

tion of the City Council of Jacksonville to the necessity of removing the sanitary nuisance above complained of, to have the same properly attended to."

Although at the date of this writing the condition of Bay street, Jacksonville, remains a menace to the public health, it is a pleasure to state that an ordinance has been passed by the City Council and steps taken to at once repave the street in question with vitrified brick.

On February 4th, 1893, a communication was addressed by the State Health Officer to the Mayor of the city of Tampa, urging action by the Council of that city upon the vital question of the sanitary disposal of the domestic wastes, saying:

"It has seemed proper to me that your attention should be called to the necessity for providing the city of Tampa with an adequate system of sewage disposal, by properly constructed sewers. It is not possible, as much as it might be desired, to construct such a system before the advent of the hot summer months, but it is within the province of your City Council to provide by ordinance for obtaining the advice of a competent sanitary engineer on the subject and then to adopt a system which will meet not only the present requirements of the city but will prepare for its future enlargement and growth. Your city has long since outgrown the benefits of a pail system, that which you now use, and to further postpone the consideration of this most necessary sanitary provision will be to imperil the health of your community in the future and to seriously reflect upon the intelligence and public spirit of your citizens."

The Mayor, the Hon. Herman Glogowski, seconded and endorsed this letter in an able message to the City Council, and it is gratifying to state that immediate steps were taken by inviting Col. George E. Waring, a sanitary engineer of national reputation, to visit Tampa, draw plans and prepare specifications for a system of sewerage, and by appropriating funds at once to carry into execution this excellent desire to improve the health of the city and to lessen the agencies of disease.

Digitized by Google

CONSUMPTION.

According to the tabulated reports for the year, consumption has caused 303 deaths. An attempt has been made to separate the residents from the non-residents of the State dying of this disease, and requests were made to the City and County Health Authorities to report deaths separately. The State Board of Health has prescribed a separate record in their tabulation. As a partial result of this movement twenty-eight counties out of forty-five report 86 native Floridians, 130 from other States of the Union, 34 from Cuba, 26 from other foreign counties and 36 unknown. Fifty-six of the decedents were in the State less than two years and only thirty-six are reported as life residents. This tabulation for the present, on account of the short period commenced, is necessarily imperfect, as it does not embrace reports from all the counties in the State. It is given merely as a pointer; but it is believed that when this discrimination in vital statistics is fully observed the State will show a less percentage of death rate from this cause among her native population of any State in the Union.

The deaths from all causes were 3,241, in a reported population of 297,071. At the same ratio, estimating the death rate of counties not reporting, the total number of deaths from all causes during the year would probably number about 4,324. The death rate per thousand of population for the year 1892, from reports received, has been 13.86; June being the largest (15.22) and December the smallest (11.03) death rate per thousand of population.

SMALL POX.

But one case of small pox has been reported to the Board during the year, although the disease has been very generally prevalent throughout the Union. It is believed that the repeated injunctions of the State Board to the County Health Authorities, and the warnings on this subject, have had the effect to arouse the public generally to

Digitized by Google

appreciate the benefit of vaccination, and the large number of vaccine points that have been distributed and used, some sixteen thousand, has contributed to the State's protection from this disease. An individual came from New York and was taken sick en route. In the Appendix will be found a detailed report of this case.

VACCINATION.

Unremitting exertion has been made during the past year to incite the health authorities, and the public in general, of the State to the importance of vaccination and the protection thereby afforded against Small Pox. Superintendents of Public Instruction of the different County Boards have been communicated with as has been also the State Superintendent, and every effort has been made to induce that attention to the subject its importance demands; especially by protecting children in the public schools where large numbers are collected, as well as in the factories in the mannfacturing towns. Danger from the spread of this disease being principally confined to the collection of individuals in numbers and in their contact with each other.

YELLOW FEVER.

Although this disease has been at the very portals of the State yet the vigilance of the State Health Authorities has prevented its entrance. On the 3d of August, the American four-masted schooner, "Eva B. Douglas," Captain J. C. Letts, four days from Havana, Cuba, and bound for Punta Gorda, Florida, arrived off the Mullet Key Quarantine Station. At Havana the schooner lay at the Taliapiedra wharf (a badly infected locality), and sent three men to the Hospital with Yellow Fever. The day following her arrival at the Quarantine Station the schooner was disinfected and fumigated and all clothing and bedding was subjected to the steam disinfecting process. She had no ballast. The vessel was then anchored in the Bay and placed under observation. On the 6th instant the Captain

Digitized by Google

developed a case of Yellow Fever. The State Health Officer arrived at the Station the same afternoon on the "Missoe" and confirmed the diagnosis of the medical officer in charge of the Station. The first mate was ordered to take the schooner to the United States Quarantine and Refuge Station at Dry Tortugas and was expected to leave early the next morning. In order to be as humane as possible Capt. Bahrt, assistant at Mullet Key Station, an experienced Yellow Fever nurse, was detailed to accompany the vessel to Tortugas and act as nurse to the sick man. However, during the night the mate and two seamen were attacked with the disease and it was impossible then to get the ship to Tortugas without the aid of a large tugboat and there was none nearer than Pensacola. Having done everything practicable to humanely get rid of the vessel and having failed, the "Douglas" was anchored five miles to leeward of the station and out of the way of passing craft. As the crew had all evidently been inoculated with the poison in Havana and were being seized one after another in rapid succession, the sick were treated on board. The entire crew were prostrated with the disease within the next few days, with the exception of the second mate, steward and a negro shipped in Havana. These three having previously had the disease. The attack of the Captain was violent and he died on the morning of the 11th in uræmic convulsions. He was buried on Anna Maria Key. The majority of the crew convalesced rapidly after slight attacks. After the occurrence of the last case the vessel was again fumigated and disinfected; mattresses, carpets and curtains were destroyed by burning and the clothing of the crew disinfected by superheated steam. After undergoing ten days observation she was given pratique and sailed for Philadelphia, her owners cancelling her charter for Punta Gorda.

The Brig "Caspian," for Apalachicola, Fla., five days from Havana, arrived off the United States quarantine sta-

Digitized by Google

tion at Dry Tortugas on the evening of July 25th. On the 26th the vessel entered the harbor and was treated to preliminary fumigation. On the evening of the 27th the surgeon in charge of the station reports the Captain died of "heart failure." On the 28th a seaman was discovered sick with Yellow Fever. This case was seen by the State Health Officer of Florida, who visited this station in the "Missoe," and the diagnosis of Passed Assistant Surgeon H. D. Geddings, U. S. M. H. S., commanding the station, was concurred in. The "Caspian" was ashore three days at the Marquesas on her passage from Havana and was assisted in getting off by fishing smacks. Touching at Key West she was directed to Tortugas by Health Officer Sweeting, of the Monroe County Board of Health. On August 11th the engineer of the "Dagmar," the tender to this Station, was prostrated with the disease. On August 27th Captain Harding and the fireman of the "Dagmar" were attacked. On September 14th another case of Yellow Fever was reported, an attache of the Station. On the appearance of the fever on the "Caspian" and "Dagmar" the State Health Officer quarantined against the Dry Tortugas, notifying each port Sanitary Inspector and County Board of Health of the fact.

LEPROSY.

There has been no case of Leprosy reported to the Board during the past year. The case noted in the last annual report as occurring at Key West, ended fatally in a few months. Strict attention is paid to immigration, both by the State and United States Inspectors at the ports of the States and the danger of the instroduction of this diseasc is thereby lessened, if not absolutely prevented.

CHOLERA.

The continued spread of cholera in Russia, the extension of the disease to Hamburg and thence to the New

*1 sbh 16pp

Digitized by Google

York Quarantine, and later on the outbreak in New York City gave rise to alarm throughout the Union, in which the State of Florida shared. Various suggestions were made to the Board and to the State Health Officer as to what was thought to be necessary to prevent its introduction to the State, and the condition of affairs in New York at one time seemed critical. The States to the North adopted and placed, or attempted to place, stringent surveillance on travel. Regulations interdicting commercial intercourse with New York were adopted one day to be revoked the next, and great confusion resulted. While the Health Authorities of Florida were mindful of the gravity of the situation should cholera materially increase in New York City, and were watchful of its daily progress, they discouraged any manifestation of alarm on the part of the citizens of the State, assuring them that everything necessary to protect their health would be done at the proper time by the Board; and it is believed that the confidence exhibited by the Board in its own powers served to quiet the apprehension of a great many nervous and panicky people and to restore that trust which insures faith in the Health Authorities to successfully cope with such emergencies and prevents interruption to commercial interests. The State Health Officer issued a circular to the County Boards of Health and to the public advising composure and as to the measures to be adopted when necessary, which, it is believed, did much to allay apprehension.

MEETINGS.

In addition to the annual meeting held on May 2d, there were two meetings of the Board during the year: July 14th at Tampa to approve rules and regulations of County Boards of Health, which, in the opinion of the Attorneys of the Board, was necessary before said rules could be legally effective. At this meeting the advisability of having a uniform code of rules and regulations for domestic sanitation for all the counties was made apparent and the

Digitized by Google

State Health Officer was directed to formulate such rules and present them at the next meeting. On September 17th a meeting was called to consider measures necessary to be taken to prevent the possible introduction of cholera into the State of Florida, at which time rules and regulations were formulated and adopted for inter-State Quarantine to be operative whenever in the opinion of the State Health Officer they should be deemed necessary. These rules and regulations are given in the Appendix.

VITAL STATISTICS.

On this subject it is not proposed to dwell longer than to refer to the very detailed statement contained in the third annual report of the State Health Officer. The circumstances attending the difficulties experienced in the collection of Vital Statistics of the State, occuring in the year 1891, were present in the year 1892. It is true that ten more counties were added to those making monthly reports, but at the same time, there never were on an average more than twenty-seven counties reporting each month. It is impossible to value the collection of Vital Statistics in dollars and cents, because of the light they shed and the influence that they thus have in inducing immigration and increasing the prosperity of the State, which, it is believed, will be in the future incomputable. As stated in last years report "Florida hopes to invite immigration, and in order to draw a desirable class from outside the State, clear, reliable, and intelligent statistical data is required, and when obtained, will be a sure guide to attract the best class of immigrants. This class we invite by our genial climate and by the varied resources of industry and wealth now opening up, but if we would hold out inducements to the dweller of the extreme North, or to the inhabitants of the Middle States, to adopt Florida as a home, it is but just that the fullest evidence of its highest degree of healthfulness is furnished, as well as other information dealing with sanitary matters." But, as we also stated in that report, "Better

Digitized by Google

results cannot be expected unless the recommendations made in the past two annual reports is approved of and adopted. When the State Board of Health relieves the County Boards of Health of the duty of collecting vital statistical data, and appoints and pays intelligent inspectors in each county, men appointed for special fitness and earnest interest in this work, then, and then only, can reliable and regular reports be had. The expense which this system would incur would be the investment of so much money, which will double itself many times over in the near future, by inviting immigration of a substantial nature, and as an expenditure will be insignificent to the immense benefit to the people of the State in acquiring knowledge of the causes which produce disease and the necessary measures to be secured to prevent the same." It is not to be expected that these statistics can be of any great value under five or ten years. It is by comparison of the data of a number of years that the life wave of a community is estimated; its increase or its decrease, and the few statistics that the State Board of Health has as yet been able to collect is but a nucleus from which it is hoped that great good will spring in years to come, and will be valuable to the vital statistician of Florida, in comparing the life data of the State and the causes that lead to its healthfulness or mortality.

QUARANTINE SERVICE.

This protective system of the State against invasion by disease from foreign shores, has during the past year claimed the major portion of the attention of the State Health Officer, and especially has unremitting care been bestowed upon it during the active quarantine season, namely: between the months of May and November. It is gratifying to observe that when the late discussion on quarantine subjects engrossed the attention of Congress, Florida received encomiums on her maritime rules and regulations and the practical appliances for destroying disease germs which have been procured and placed in opera-

Digitized by Google

tion at her principal quarantine stations. This evidence of approbation from distinguished men is convincing that the policy of the State Board of Health on Maritime Sanitation, which has been successfully practiced for the past three years, has been an efficient means of protecting the health of the commonwealth, and, at the same time, conserving her commercial interests. The Mullet Key Quarantine Station, at the entrance to Tampa Bay, was in active operation from May to November, during which time 240 vessels arrived and were inspected, released or detained for discharge of ballast and disinfection; 8,317 passengers and seamen belonging to these vessels were examined, passed without detention, or kept for observation for a period ranging from five to fifteen days, as provided for in the rules and regulations. The fact of the crew of the Yellow Fever schooner "Eva B. Douglas" being treated off the Quarantine Station named, and that no case of sickness invaded the Station or was communicated to the State, is congratulatory evidence of the ability of the State Board of Health to manage successfully emergencies of this kind, and should give confidence to the public as to the vigilance of the officials and the means under the control of the Board necessary to accomplish these ends. That Yellow Fever was not communicated from the United States Quarantine Station at Dry Tortugas to Key West, its nearest port, is due to the care and prudence exercised by Dr. C. B. Sweeting, the Port Sanitary Inspector of the Monroe County Board of Health, at Key West, who restricted all communication with Tortugas to the minimum; compelling the tender "Dagmar" to anchor a sufficient distance from the town and superintending in person the conveying of all stores and nails to her from the city of Key West. The fees collected at the Mullet Key Quarantine Station amounted to $4,474.25 and $4,117.71 was expended in operating the plant. This does not include $9,381.66, the cost of the ballast crib, which is viewed as a permanent

Digitized by Google

investment. A physician in charge and six men operated the plant. It is a pleasure to testify to the zeal and efficient management of the Station by Dr. D. M. Echemendia, the Medical Sanitary Inspector, who has ever been careful in his attention to the details of the work and conscientious in compelling obedience to the Maritime Regulations of the Board. Experiments were conducted at this Station in the matter of steam disinfection of different classes of clothing and merchandise as well as letters and mail matter. Examination of tables published elsewhere will show the increase in arrivals at this Station during 1892 over 1891. It will be appreciated that each year the growth of commercial industry at Port Tampa and Charlotte Harbor and the increase in exports by transportation chartered in foreign infected ports will demand from this Station more and more work and the constant exercise of careful surveillance and supervision over vessels from these ports, especially from the ports of Cuba, so near to us.

The Ballast Crib, mention of which was made in the last annual report as having been ordered built for this Station, was completed in August and has been of great convenience in the discharge of the ballast of those vessels suspicious as to their ports of departure or for continuous service in tropical seas. The cost of this crib was $9,381.66. It is constructed of creosoted pine piling, with yellow pine decking and spring fender piling to protect the main structure, with an approach to the shore on which a tramway is placed to facilitate the discharge of infected or suspicious ballast and the re-ballasting with clean sand ballast from the shore.

PATROL BOAT.

The quarantine patrol boat "Missoe" did efficient service during the summer just passed. In fact, it is not known how the infected schooner "Douglas" could have been successfully managed without some such means of transportation as was afforded by this boat, and the State

Digitized by Google

Health Officer considers that to meet emergencies of this nature, which are likely to arise each season, a tender, such as this boat is designed for, is an absolute necessity and cannot be dispensed with without seriously crippling the quarantine service. In this connection attention is called to the third annual report in regard to the purchase and repairs to the "Missoe," where the subject is dealt with in detail.

BOARDING STATION AT BOCA GRANDE.

The Boarding Station recommended to be built in the last annual report was completed and opened in August, and maintained to the close of the quarantine season. Under a concession from the United States Lighthouse Board, the State Board of Health erected on Gasparilla Island, at the mouth of Charlotte Harbor, at a point known as Boca Grande Pass, a plain, but substantial and comfortable dwelling, where an inspector of the State Board of Health resides during the active quarantine season and inspects all vessels which arrive for the port of Punta Gorda (now a port of entry) and directs all those directly or indirectly from foreign or domestic infected or suspicious ports to the Mullet Key Quarantine Station for fumigation and disinfection. The force at this station during the quarantine season consists of a physician in charge, a boatman and cook. The cost of constructing and furnishing the station was $1,544.84 and the annual expense is estimated to be $2,040.00.

SARASOTA.

A small house for the convenience of the State Board's Inspector was built at Sarasota at a cost of $102. The inspector there is an intelligent layman who lives continously during the quarantine season at this point, where he is enabled to keep supervision over several little passes or entrances from the Gulf into the inland waters between Sarasota and Tampa Bay.

ANCLOTE KEY.

Accommodation similar to that erected at Sarasota will

Digitized by Google

be necessary during the coming quarantine season at Anclote Keys, forty miles north of the Mullet Key Quarantine Station. There is a safe anchorage here and it is a favorite refuge in squally and bad weather for Spanish smacks during the summer season. It is known that at such periods frequent communication is had with the shore; indeed, the State Health Officer, while cruising on the steamer, "Missoe," last season, ran upon some sixteen of these craft and intercepted a small boat from the shore, having communication with one of these interdicted strangers. The small boat and men were kept under arrest for a short time when they were reprimanded and released, but the facts in the case with the names of the men and boat were reported to the Secretary of the Treasury through the Collector of Customs at Tampa.

UNBALLASTING VESSELS.

The attention of the Board is here directed to a class of vessels arriving at the Mullet Key Quarantine Station during the past summer from the Windward Islands. They belong to an order of marine architecture not generally met with in this advanced age of shipbuilding. I refer to the French and English iron ships, very deep and sharp, whose ability to maintain an upright position depends upon the large amount of ballast that is carried. These vessels, the "Mindin," "Marie Eugenie," "King Alfred." and "Chittagong" arrived at the Mullet Rey Quarantine Station on the 12th, 14th, 19th and 28th of September respectively, destined for Punta Gorda, and when ordered to unballast, the captains informed the officer in charge of the station that it would be impossible for them to comply with the demand, as with ballast out their ships would turn over, and they positively refused to make the attempt. The matter having finally been referred to the President of the Board it was ordered by him to make such disinfection as was possible, and then allow the vessels to proceed to their destination, the season being so far advanced as to render

Digitized by Google

it improbable that any danger would result from permitting the discharge of this ballast in Charlotte Harbor. It is desired that the regulations relating to ballast, and the character and discharge of the same, be amended so that in the future there may be no clashing between shipmasters and the executive of the Board. It was suggested that with topmasts down and used as ballast logs that this difficulty could be overcome, but on thorough investigation it was found that, without great risk to the vessels (which the masters did not care to assume, or the State Health Officer feel inclined to insist upon), the only thing that could be done was to shift the ballast in the holds of the vessels and make such disinfection and purification as circumstances permitted. The ballast was thoroughly soaked with bichloride of mercury and, the vessels being iron, it was not thought that there was any great danger in allowing them to proceed to Boca Grande Pass, where they proposed to take in phosphate. Some detention of the vessels at the Station occurred, occasioned by the delay in correspondence back and forth, and in the endeavor of the State Health Officer to have the rules and regulations of the Board carried out. It is suggested that discretionary authority might safely be vested in the State Health Officer for emergencies of this nature.

OFFICE WORK.

As is to be expected the work of the office of the Board has steadily increased from the date of its organization. At the end of the first year of the Board's existence the correspondence, letters received and written, amounted to 2,603, in '90 the number was 3,153, in '91 it was 3,372, and during the past year to date there have been 1,746 written and 1,417 received, a total of 3,163. In this the fourth year of the Board's existence the office work in various sections has quadrupled that of the first year. Much information has been disseminated by circulars, and a great many inquiries have been replied to, furnishing information

Digitized by Google

to seekers after various kinds of sanitary knowledge of the State. As has already been referred to, an important work of the Board during the past year has been the publication of a monthly bulletin containing tabulated tables of vital statistics, with original articles on sanitary matters from the office of the Board and various correspondents; likewise valuable extracts from standard sanitary periodicals. From the flattering communications that the Board has received in regard to this publication it feels assured that its work in this direction has been appreciated, and has been of incalculable value in stimulating public sentiment to the necessity of hygiene and its requirements, and also in circulating useful information in regard to the health of the State. The bulk of this work has been done with but one assistant, Mr. Frank B. Matthews, who, as Clerk of the Board, has taken complete charge of the routine work of the office. His urbanity and obliging disposition has won friends to the cause of sanitation and to the Board, from those who have paid official or social visits to the office, and his earnestness and especial fitness for the work, rendered so by a study of its requirements, careful attention to detail and conscientious discharge of duty has enabled the executive officer of the Board to bestow more personal attention and watchfulness on the ports of the State and to the prevention of contagious disease threatening introduction from foreign countries. Without capable assistants, clerical as well as port inspectors, much embarrassment must necessarily follow in the execution of the laws or regulations, therefore, it is gratifying to state that the employes of the Board are intelligent, faithful and competent officials, alive to the requirements of duty, with an ardent desire to discharge them to the best of their ability.

NATIONAL LEGISLATION.

The spread of Cholera in the Russian Empire, and its transmission to Hamburg in the early summer, gave rise to much alarm on this side of the Atlantic, lest the dread

Digitized by Google

scourge should obtain a foothold on this continent, and when a steamer from Hamburg arrived at the New York, quarantine, pest ladened, having had several cases and deaths en route, the danger to this country was fully realized, and immediate steps were taken by the quarantine health officials in New York to make ample provisions for the arrival of immigrants and other passengers, both well and sick, so that the former could be kept under observation and have necessary attention paid to the disinfection of baggage, as was demanded, and the later isolated and properly cared for. The United States Treasury Department, through the Marine Hospital Service, and the Governor of the State of New York, by liberal purchase of sites, aided the quarantine officials of New York city, and the immense danger to which New York and the Union seemed at one time threatened, was happily averted. An enormous strain was put upon the appliances of quarantine at New York, besides, a grave responsibility was thrown upon the officials. It is believed, however, that the work was carefully attended to and the conditions were ably controlled, notwithstanding that cases of Cholera developed subsequently in New York city. The Board of Health of New York city, by its thoroughly organized and equipped corps, were also equal to the emergency, and promptly isolated cases and checked the spread and there was no epidemic of the disease. The whole country was thoroughly alarmed, and the fright which in a measure was restrained by confidence reposed in the health authorities, needed but very little stimulation to result in a panic. Petitions from Boards of Health and Chambers of Commerce, and other commercial circles, to the President of the United States, urged him in the exercise of his prerogative to suspend immigration from foreign countries, which he did in a proclamation issued September 1, 1892. On the assembling of Congress in December, several bills were introduced to restrict immigration, or to suspend it entirely for a year, and to establish a National

Digitized by Google

Quarantine System. Representative Stump, of Maryland, Chairman of the Immigration Committee in the House, and Senator Harris, Chairman of the Public Health Committee in the Senate, were particulary active in behalf of these measures. During the recess of the Christmas holidays, a joint Committee of both Senate and House, composed of Senators Proctor (chairman of the Committee), Dubois, Call, Squire and Gibson, and Representatives Stump, Covert, Coburn and Wright, visited Cuba investigating matters relating to immigration and quarantine. They were met at Key West by the State Health Officer, and upon the urgent request and invitation of the Chairman, Hon. Redfield Proctor, that official accompanied the Committee to Havana and back to Port Tampa. A short stop was made at the Mullet Key Quarantine Station, and the disinfecting plant of the State was exhibited and explained in its workings to the members of the Committee. The Committee were courteously treated while in Havana by Consul General Williams, Dr. Burgess, the very efficient Sanitary Officer of the United States Government, attached to the consulate there, and by the Spanish officials of the Superior Board of Health of the Island of Cuba. From Dr. Burgess and this latter organization much valuable information was gained of a sanitary nature, both as relating to Cuban and Spanish health preventive measures against importable contagious diseases and as to measures necessary to protect the United States from foreign invasion of this nature. Aside from the social features connected with an association with this committee of several days, which was most pleasant and greatly enjoyed, the State Health Officer was enabled in a business way to impress the gentlemen with the necessity of government aid in the coast protection of Florida by a thoroughly organized coast patrol, the expense of which would be too great to be borne by the State. The Committee expressed itself as greatly pleased with the Rules and Regulations of the State Board of

Digitized by Google

Health of Florida, and the complimentary remarks about health protection by Florida, made in the Senate by Senator Squire and others, would seem to indicate that the Committee were favorably impressed with the work of the Florida Board of Health. The testimony of the State Health Officer, of Dr. Burgess, and of several citizens of Key West, on quarantine matters is given in the Appendix and will be found interesting.

The National Quarantine Act, championed by Senator Harris, met with active opposition, which came from the exponents of the tenets of the Constitution, and also from the State Boards of Health of the Atlantic and Gulf coasts, whose very excellent administration of health and sanitary affairs of their respective States, in the past, made them exceedingly unwilling to acknowledge that the administration can be in any manner bettered by being placed under Federal supervision. The State Health Officer of Florida was importuned to protest against the passage of any National control by Congress; but he refrained from taking an active part in the discussion of the matter, preferring to leave the representatives of the State in Congress uninfluenced by suggestions from him, as from what he could learn from conversations with representative citizens and from the utterances of the press of the State, the sentiment of the people seemed largely to be in favor of turning over the management of the State Quarantine to the General Government. No doubt this feeling was influenced largely by the expense which a State Quarantine entails upon the tax-payers. It is believed that no fault is found, or can be found, with the State Health Officials, nor can it be charged that they have not administered the management economically, justly and efficiently. All of this is conceded. The revenue, however, derived from shipping, in the matter of disinfection and quarantine detention, has not fully reimbursed the State for the expense of maintaining the stations, and the burden—if it can be considered a burden—of this

Digitized by Google

absolutely necessary supervision of the health of the State through the ports has fallen partly upon the tax-payers.

An argument advanced by the friends of the bill for National control of quarantine is that the commerce of the country will be relieved thereby, of an unjust tax in the matter of fees for disinfection and cleansing of vessels from foreign infected ports. In other words that the purification necessary should be done free, and this the Harris Bill proposed to do. Attention is invited to the fact that nine tenths of the commerce of this country from foreign ports which menace our health, is carried on in foreign vessels—that is to say, vessels owned either in whole or in part by foreign ship owners, and who seek our ports for their own benefit. The General Government does not admit these vessels free to entry in our custom houses. Why then should the people of these United States be called upon to pay for protection against importation of disease from foreign sources and by foreign carriers? In other words, why should a German, Italian or Spanish ship or Cuban smack, with Cholera, Yellow Fever or Small Pox patients on board, or infected with these diseases, be cared for as to their passengers, and disinfected and purified as to each at the expense of this Government? No other Nation accords such privileges to foreign vessels, and in the National control of quarantine the State Health Officer enters his protest against free disinfection of foreign shipping.

Having given much thought to the subject the executive officer of this Board would strongly urge the appointment of a Secretary of Health in the President's Cabinet, who, acting through the State Boards of Health, can advise, counsel and distribute sanitary information and useful hygienic knowledge. Congress could and should annually appropriate a sum of money to assist in preventing the introduction of epidemic diseases into the United States, and to aid in suppressing any that may arise. This fund should be distributed through the Cabinet Officer to the State

Digitized by Google

Boards, according to the necessities or requirements of each, and the financial ability of each to help itself. This money could be accounted for by detailed statements of expenditures to the proper auditing officers of the Government. But the administration should be left entirely to the State Boards. The General Government aids in some such way the militia of the States by supplying annually a certain amount of arms and ammunition and tents, therefore, in the same manner, it could aid in protecting the public health. It is believed that a system of national supervision, such as is roughly outlined in the above suggestion, would meet all the demands for a National Quarantine that is called for under our form of government.

The original bill for National Quarantine Control, introduced in the last session of the United States Congress, received much attention and drew forth much criticism, and when the measure was finally passed it was found to be divested of many important features, the supposed necessity for which public sentiment had suggested this Federal health supervision. The Supervising Surgeon General of the Marine Hospital Service, is charged, under the Treasury Department, with the executive portions of the Act, and immediately upon the approval of the same by the President a board was convened which formulated and published regulations for inspection at foreign ports, of vessels, their crews and passengers, and also for their detention when necessary, if bound for any port in the United States. Later, by direction of the Secretary of the Treasury, a conference was called with the Supervising Surgeon General, of the health officials of the Atlantic and Gulf Coast States to consider necessary measures of Maritime Sanitation and Quarantine to protect the ports of the United States against the introduction of contagious disease. This Conference, invited by the following telegram, was called for the 16th and 17th instant:

"You are hereby invited to a conference with myself

Digitized by Google

in Washington, March 16th and 17th, with a view to uniformity of rules and regulations of quarantine on the Atlantic and Gulf coasts. Sixteen other representatives invited. Traveling expenses to be met by the conferees. Please wire reply. By authority of the Secretary of the Treasury." (Signed)

WALTER WYMAN.

Supervising Surgeon-General, M. H. S.

The propriety of attendance being left by the President of this Board to the judgment of the State Health Officer, he considered the interests of Florida in such a meeting were of sufficient gravity to have representation and the invitation was accepted.

There were present at this conference Drs. Durgin, Port Physician of Boston, Mass.; Fraser, of Providence, R. I.; Frank Wright, Health Officer, New Haven, Conn.; Clark Hunt, of the State Board of Health of New Jersey; Benjamin Lee, Secretary of the State Board of Health of Pennsylvania; W. C. Curtis, Quarantine Officer, Wilmington, Del.; James P. McShane, Commissioner of Health, Baltimore, Md.; Wm. A. Thompson, Quarantine Officer at Norfolk, Va.; Willard Springer, Health Officer, Wilmington, N. C.; H. B. Horlbeck, Health Officer, Charleston, S. C. · W. H. Brunner, Health Officer at Savannah, Ga.; S. R. Olliphant, President State Board of Health of Louisiana; R. M. Swearengen, State Health Officer of Texas; Major Moses Veale, Health Officer of Philadelphia; and the State Health Officer of Florida.

At the opening of the Conference, the Supervising Surgeon-General, as chairman, announced the purpose of the same, stating that the views, opinions, and suggestions, which were asked for from those invited, on certain regulations which he had prepared and would submit, would receive careful attention, and due consideration would be paid to the commercial interests and necessities of the several sections of the country, yet it was not promised that

Digitized by Google

any of the transactions of the Conference would be binding in the subsequent formulation and promulgation of regulations for domestic quarantine observance at ports in the United States. The debate of measures thought necessary to protect the public health were in the nature of advisory suggestions, and covered a wide range of subjects; the contagious quarantinable diseases receiving prominent attention. When the subject of Yellow Fever was reached, objections were made by the State Health Officer of Florida to the general regulations of detention of five days at the port of arrival, of all classes of vessels, from ports infected with the disease. He stated that under certain restrictions of construction, time of entering and remaining in the harbor of Havana, class of passengers transported, and disinfection of baggage, such as is now prescribed by the regulations of the State Board of Health of Florida, he thought communication with Cuba could be safely permitted during the summer months, and therefore he moved to substitute the regulations of the State Board of Health of Florida. As was expected, this suggestion brought forth much discussion, in which the representatives from Louisiana and Texas forcibly opposed the suggestion, but the following was offered in a formal motion by the State Health Officer of Florida, and was adopted:

"Communication without detention at ports of arrival may be had with Havana at all seasons of the year, provided that the ships be of iron, of special construction and under special requirements hereinafter provided for by the United States Marine Hospital Surgeon-General and that the vessels comply with the regulations as prescribed by the United States Quarantine laws requiring disinfection abroad and that the baggage and all articles capable of conveying infection be disinfected according to United States quarantine rules at port of arrival. *Provided*, further, that no bedding nor household effects be allowed at any time and that none but immune persons be allowed as passengers or crew from May 1st to November first."

*2 sbh 16pp

Digitized by Google

The Chairman appointed as a committee to formulate the conditions of communication with Havana, as set forth in the above motion, the State Health Officer of Florida, Dr. Horlbeck and Dr. Olliphant. The Conference was harmonious in its transactions and it is believed much general good will result from the interchange of views and opinions there had and from the feeling of closer relationship which a meeting of this nature begets. It is complimentary to Florida to note that of the two committees appointed during the Conference she was honored with the chairmanship of both.

INTERNATIONAL QUARANTINE INSPECTION COMMISSION.

A Commission from the Executive Committee of the National Conference of Boards of Health, represented by Dr. J. N. McCormack, of Kentucky, Dr. H. B. Baker of Michigan, Dr. P. H. Bryce of Ontario, Dr. I. A. Watson of New Hampshire, Dr. J. R. Laine of California, and Dr. Orvananas of Mexico, commenced on August 31st an inspecting tour of the quarantine systems as practiced on the Atlantic and Gulf coasts.

It was proposed to continue these investigations through the Gulf and up the Pacific coast, but upon the appearance of Cholera in New York city it was thought best to defer further inspections for a few weeks, as each member of the Commission was connected either as an executive or member of some health organization of his State, and the uneasiness of the public generally demanded their immediate presence at home. From press notices of interviews with these distinguished sanitarians, it is learned that much dissatisfaction and disappointment is expressed at the inefficient appointments of the quarantine stations as far as visited—Delaware Breakwater. The paucity of properly constructed disinfecting plants for superheated steam disinfection and sulphur dioxide fumigation, or the total want of these necessary disease-destructive agents were apparent at the stations visited and were commented upon. This is to be

Digitized by Google

wondered at when it is considered that the portion of the Atlantic coast visited by these scientists embraces what has generally been considered to be the section of the United States noted for wealth, public spirit and a generous lavishment of funds, wherever necessary for scientific or sanitary purposes. It is to be hoped that Dr. McCormack and his confreres will resume their inspections before making any report, at least until they have visited Charleston, S. C., Mullet Key and Pensacola, Florida; Mobile and New Orleans, where they will find quarantine stations so well equipped, there will be no occasion given to complain, but rather to commend.

STATE LEGISLATION.

It is believed that several of the Statutes in regard to Public Health should be repealed, and the Act creating the State Board of Health could be improved in many particulars; but a great difficulty attending the amendment of any law lies in the many changes proposed when the attempt is made to alter and the liability to a mistaken change in the purposes of the measure and perhaps the defeat of the very purpose of remedy for which the amendment was thought necessary. At the session of the Legislature in 1891, measures were recommended for the collection of vital statistics in several counties and for the formation of a State Bureau of Vital Statistics; also to perfect the requirements of the quarantine system of the State and for direct sanitary supervision by the State Board of Health in the abatement of those agencies, which produce or are likely to cause disease in the towns of the State, and bills drawn for this purpose were offered. In the heat of a struggle over the election of a Senator, these measures, with other necessary ones, were subordinated and lost sight of. It is to be hoped that at the coming session, sanitation and measures necessary to make "life worth living" comfortably, profitably and pleasurably, may receive their just share of attention. The Legislature need only to seriously consider them to be

Digitized by Google

convinced of the defects in the present laws and to have them remedied by needful legislation.

The distinguished colleague of the executive officer of the State Board of Health, and an able advocate of sanitation, Dr. R. P. Daniel, when writing last year, from the chair of presiding officer of the State Board of Health, strongly recommended the repeal of the statute for County Boards of Health, saying: "I believe it would promote the financial as well as sanitary interests of the people of the State to abolish the County Boards of Health entirely and to legally authorize the State Board to appoint and pay such local health inspectors as might appear needful. Certainly this is the only method by which any data can be collected, sufficiently full and reliable, to possess value in formulating vital statistic returns for our State, and such statistics, if comprehensive and exact, would, without doubt, demonstrate the healthfulness of Florida, and indirectly promote her interests, and materially aid in her development." In this the State Health Officer concurs. He has faithfully tried, first, to interest the County Commissioners and people, to recommend suitable persons to the Governor for appointment on County Boards of Health, and secondly, has persistently urged organization and action, after appointment; to make reliable the vital statistics of the State by careful and accurate compilation of a life and death enumeration. The efforts in this direction have not met with the success that the Board expected. A few City and County Boards of Health have made a determined fight against dirt and disease, and for a better collection of life data, but a larger number of the counties have been apathetic and indifferent to this subject, as is evidenced by only twenly-eight monthly sanitary returns, of the forty-five counties in the State, and this number has never reported regularly; so it would seem that it would result in a more efficient administration and attain results more satisfactory and reliable to repeal the law of County Boards of Health and charge the

Digitized by Google

State Board directly with the management of sanitation, collection of vital statistics and other matters of health supervision. No extra expense would be incurred in this new proposed *regime;* nor is an extra appropriation asked for, for it is believed that the work can be accomplished by the State Board from the levy now authorized to be collected for the State Board of Health's maintenance and especial fund. On the score of economy it is suggested to turn the State's quarantine system over to the General Government for management under the Treasury Department. Under the present National Quarantine Act this procedure is not practicable nor is it advisable. It is believed by those who have bestowed thought on the subject that local officers, having knowledge of the interests of the people and directly concerned in the protection afforded, besides having thorough acquaintance with the necessary requirements to conserve the health of the port of arrival and at the same time protect the commerce, will more efficiently discharge the obligation imposed by regulations than those from the interior or from a different section of the country, and who may also be entirely new to this particular line of sanitary work. The State Board of Health should retain its home supervision of its ports, which it is certainly the most capable of exercising. A better and more practicable plan, and which is here recommended, by which the State would best uphold her dignity and self-respect and demonstrate her ability to preserve without Federal interference the health of her seaports and at the same time reduce taxation for health purposes on her citizens, will be to abolish the County Quarantines and to devolve upon the State Board of Health the supervision of the same; which may be, no doubt, self-supporting, as inferred from an examination of the following table:

Digitized by Google

OPERATIONS STATE AND COUNTY QUARANTINE STATIONS
May 1st to November 15th.

	No. of Vessels Inspected.	No. of Vessels Disinfected.	Amount of Tonnage.	No. of Passengers.	No. of Crew.	Amount of Fees Collected.	Cost of Maintenance.
Mullet Key Station, (State)	240	86	140,592	2,684	5,633	$ 4,062.50	$ 3,512.21
Pensacola Station, (Escambia Co.)	307	168	186,616	119	3,727	17,961.75	10,317.04
Fernandina Station, (Nassau County)	210	30	146,010	482	2,745	2,430.25	2,363.60
Key West Station, (Monroe County)	330	*	. . .	. .	. .	1,855.50	2,070.76
Cedar Keys Station, (Levy County)	133	. .	3,001	100	1,300	7.00	383.51
Apalachicola Stat'n, (Franklin Co.)	129	29	38,732	9	588	2,394.28	1,728.87
Boca Grande Stat'n, (State)	31	*	23,225	4	478	40.00	1,276.83
Punta Rassa Station, (State)	85	*	33,756	83	390	. . .	195.00
Totals	1,465	313	571,932	3,481	14,861	$28,751.28	$21,847.82

* No vessels disinfected. All sent to Dry Tortugas or Mullet Key for fumigation.

After one or two more disinfecting plants have been erected the larger ports can financially assist the smaller ones, by using their excess of income from fees, over the expenses of operation. Thus the whole coast being under one head, the State Board of Health, the supervision through local resident agents at the several ports can be made more economical and effective, and without that confusion that now results from the want of harmony in the regulation of the County Boards and the State in the division of authority and responsibility existing as at present.

The State Health Officer has carefully prepared two bills (which are given elsewhere) and presents them for the

Digitized by Google

consideration of the Board and members elect of the Legislature. It is asked that these bills be carefully examined, and if the measures are meritorious, their consideration, approval and enactment is solicited.

FINANCES.

In discussing the finances of the State Board of Health, the Secretary of the Board is conscious that the money question and the expense of operating the Board are to the average tax-payer the main subjects to be considered in dealing with the proposition of health protection. The hope is expressed, however, that the Legislature, composed of thoughtful men, may give thoughtful consideration to this subject and by a careful examination of the tables in the Appendix will be satisfied that the funds of the Board have been carefully managed, and expended with a due regard to economy and efficiency. How much will it cost? and Can the State afford it? is oftener asked than, without this protection, how many lives may an epidemic cause, or what damage to the commercial interests will be experienced? The Board, through its influence, may be regarded as very necessary and a great benefit to the State, but if the cost of maintenance is large, then, in the spirit of mistaken economy, it is to the monetary interests of the State to trust to chance and cut off this expense to tax-payers; particularly so when the direct benefit cannot be mathematically demonstrated in dollars and cents. The amount of money received by the Board from the State during the past four years (quadrennial term of the executive officer of the Board) has been $106,425.80 and from fees at quarantine stations operated by the Board $8,257.50, making a total in receipts of $114,683.30.

Of this amount the Board has as durable assets, from which it can realize when necessary, a steam and vapor disinfecting plant and quarantine station, of modern construction, and a quarantine and patrol boat, the total value of which at a low figure can be safely estimated at $50,000.

Digitized by Google

Besides these investments the Board owns a boarding station at Boca Grande Pass, Charlotte Harbor, and office furniture, including a safe, typewriter and books and blanks, which would increase the list of available assets to considerably more than one-half the sum which has been expended. If the full levy, as authorized by the Statute creating the State Board of Health, had been made each year the health fund of the State would have received about $132,000, which, with $50,000 appropriated by the special session of the Legislature for the year 1889, would have increased this sum to $180,000 in round numbers. It should not be forgotten that no levy was made at all in 1889 for 1890, and for 1891 and 1892 the levy was curtailed by the State's Executive to one-half of the amount authorized by law. The total expenditures have been $105,764.62, distributed as follows: 1889, $11,405.25; 1890, $40,406.03, (erection of station and purchase of Missoe); 1891, $23,175.87; 1892, $30,777.47.

It must be remembered that $935.78 was the cost of the Yellow Fever cases at Sanford in the spring of 1889, and $764.21 of the cases in Key West in the fall of the same year. These expenditures were for guards to isolate infected premises and to reimburse for articles of bedding and clothing destroyed to prevent the spread of the contagion. The case of the infected bark "Soli Deo Gloria" in 1891 also, which cost $593.02. The erection of a ballast crib at the Mullet Key Quarantine Station and a Boarding Station at Boca Grande Pass was at an expense of $12,000 in round numbers, and, as before noted, are in the nature of assets and should be deducted from the total of expenditures in estimating the current expenses of the past year. Thus it will be seen that of the current expenses of the Board for the past four years, which includes printing, blanks for statistical and sanitary returns, for stationery, stamps, expressage, rent, telegrams and attorneys' fees, the maintenance of the Mullet Key Quarantine and the

Digitized by Google

Station at Boca Grande, with the salary of the State Health Officer and other employees has not exceeded $60,000, making an average per year of $15,000. Florida is attracting by her varied sources of wealth, hitherto undeveloped, attention from capitalists all over the Union, and marked interest is manifested in her development; great successful financial possibilities being predicted. The phosphate industry is yearly increasing its exports, bringing to our ports vessels from non-desirable foreign ports, made so by the constant prevalence of contagious diseases in epidemic form. This menace to our health will necessarily increase with the activity of trade and to provide against introduction of disease and safely encourage our commerce should be not only the duty, but the cheerful endeavor of each member of the Legislature. The State Health Officer cannot but believe that the Legislature will view the necessity of a State Board of Health as a patriotic and humane measure outside of the financial disaster and depression which would inevitably result in the repeal of the law. The support of the Board should be liberally provided for. Quoting from the third annual report, "The executive officer of the Board believes he has been as economical of the public funds as was consistent with efficient management. No money has been spent not duly authorized by the Board as demanded by or in connection with the sanitary necessities of the State. To endeavor to manage the health department of the State on a merely *cheap plan* promises defeat of the very objects sought for, the confidence of the people and the success which justifies it. It is believed that the people of Florida, the business men, the investors and all others interested in the financial development of the State, constantly dread a return of the situation which led to the loss of life and depression in trade during the years of 1887 and 1888, and are now satisfied that an intelligent management of health matters through a central health organization, such as the State

Digitized by Google

Board of Health, has accomplished great and lasting good to the State; but the people must realize that to continue this work and to perfect it each year, requires substantial aid in the way of liberal appropriations. If it is not intended to do this, but to have a State Board of Health in name only, it would be better and more honest to our neighboring States and the country in general, to repeal the law, for in that case there would be no pretence of doing what without money it is impossible to accomplish."

The amount of funds employed in establishing any business should not be comprised in each year's current expenses, and in dealing with this question on purely business principles this business axiom should not be lost sight of. If the recommendations noted later on are concurred in by the State Board of Health and adopted by the Legislature as Statutory enactments it is believed that the quarantine system of the State can be made not only self supporting but to yield an income from which other needed disinfecting plants may be erected at ports not now protected by these necessary maritime sanitary appliances. The repeal of the Statute creating County Boards of Health will rescind the one mill tax now ordered levied for the support of these Boards. This will relieve taxation for health purposes on individual counties and it is thought will be appreciated and approved of by the taxpayers generally.

RECOMMENDATIONS.

The suggestions made in last year's report, thought necessary to increase the efficiency of the Board, were carried out in a few particulars. The Boarding Station at Boca Grande Pass has been erected and equipped and the Hospital at the Mullet Key Station has been contracted for. It is again urged that the disinfecting plants recommended for the harbors of Key West and Fernandina be considered, as their erection is necessary and imperative. The former being almost at the outside entrance to Havana and the latter fast becoming a large port for the shipment of lumber

Digitized by Google

and phosphate to foreign ports. This can better be appreciated by an examination of the table of operations of the different quarantine stations in the State, as controlled both by the State and the several counties. The station at Fernandina, it is thought, will cost in the neighborhood of fifteen thousand dollars, and it is authoritatively stated that the Nassau County Board of Health would very willingly relinquish to the State the control and management of the quarantine for the port of Fernandina and contiguous coast now under its jurisdiction.

CONCLUSION.

In concluding the fourth annual report, the State Health Officer will be pardoned for alluding to the many difficulties which have been experienced in organizing a system of domestic hygiene and sanitation for the towns, and for the prevention of the introduction of disease through the seaports. When the State Board was organized, and the present incumbent accepted the office of State Health Officer, there was little to guide him in the formation of rules and regulations, except the experience gained as a member of a County Board of Health, and in the epidemic of the year previous. It was scarcely to be expected that a perfect system could be at once inaugurated and maintained; first, because of the want of funds to procure necessary appliances in the way of quarantine stations and disinfecting plants, and secondly, the lack of education of the people in regard to the importance of sanitation, which necessarily caused them to view with disfavor any encroachment on their private rights or privileges. These difficulties were to be combatted and overcome. It is believed that this has been accomplished, and that by carefully avoiding antagonisms, and by a determined warfare against disease, the last four years has demonstrated the usefulness of the State Board of Health of Florida. This will become more apparent each year as the country becomes settled up by a class of people whose experience in other States,

Digitized by Google

older in this regard than Florida, has taught them the usefulness and value of health protection in a financial sense.

The State Health Officer fearing that his health was not adequate to the demands which the labor connected with the quarantine system of the State during the summer months in the future would impose upon him, on the 17th of January tendered his resignation to the President of the Board, to take effect whenever he (the President) "considered that the requirements of the service justified the appointment of his successor." No action having been taken, other than a verbal request from the President to allow the matter to lie quiescent for a time and the period for which he was elected expiring on the 26th, it is not now thought any further action necessary. The trust confided to him four years ago is now returned to the Board with the hope expressed that however short of fulfilling the ideal the work has been, the effort to attain the best results with the means at command will be thought to have been faithfully and honestly made, and that the foundations having been laid, the work may each year attain a greater perfection, which must eventually result in great financial benefit to the State at large. The State Health Officer desires to tender to the President and to each of the members of the Board his heartfelt gratitude for courtesies received at their hands and for the unbounded faith that they have always manifested in his ability and integrity. To the President of the Board he especially feels indebted for the generous support he has always accorded him and for the unlimited confidence to which the many evidences of his friendship bears testimony.

JOSEPH Y. PORTER.
State Health Officer.

Digitized by Google

Digitized by Google

APPENDIX

Digitized by Google

Digitized by Google

FINANCES.

STATEMENT OF EXPENDITURES SINCE ORGANIZATION OF THE BOARD.

Disbursements from May, 1889, to April 30, 1890, being the first fiscal year	$ 11,405 25
Disbursemrnts from May 1, 1890, to April 30, 1891, being the second fiscal year	40,406 08
Disbursements from May 1, 1891, to April 30, 1892, being the third fiscal year	23,175 87
Disbursements from May 1, 1892, to February 28, 1893, being the fourth fiscal year	30,777 47
Total expenditures since organization	$105,764 62

ITEMIZED AS FOLLOWS:

	1889.	1890.	1891.	1892.	Total.
Per diem and mileage expenses of members	$ 1,361 60	$ 481 20	$ 661 40	$ 376 80	$ 2,881 00
State Health Officer's Salary.	3,056 47	3,000 00	3,000 00	2,250 00	11,306 47
State Health Officer's traveling expenses	707 70	805 70	926 83	511 59	2,951 82
Clerical assistance	1,047 09	927 50	1,065 00	920 00	3,959 59
Attorney's retainers	408 97	306 85	364 60	250 00	1,325 42
Inspectors salaries	1,442 01	1,894 56	1,442 50	657 50	5,436 57
Office rent	260 00	295 00	240 00	150 00	945 00
Office furniture	325 65	77 77	76 00	9 00	488 42
General office expenses	187 01	296 76	202 01	185 40	871 18
Printing and Stationery	614 62	624 20	468 45	504 60	2,211 87
Printing annual reports		265 00		175 00	440 00
Official telegrams	187 99	66 67	74 88	70 82	350 36
Yellow fever cases at Sanford	935 78				935 78
Purchase of steamer Missoe		5,000 00			5,000 00
Alterations to Missoe		1,028 46	3,223 17		4,251 63
Repairs to steamer Missoe				2,174 88	2,174 88
Maintaining steamer Missoe		1,926 12	5,496 41	3,666 08	11,088 61
Yellow fever cases at Key West	764 21				764 21
Station at Port Tampa	27 35				27 35
President's trip to Charleston	28 30				28 30
Packing camp equipage		11 15			11 15
Dr. J. C. Burroughs' trip to St. Augustine		18 70			18 70
Draughting plans	60 00		139 00		199 00
Boat hire	28 00	310 00	20 00		358 00
Erecting Mullet Key Station		21,687 87			21,687 87
Salary of supervisor		908 33			908 33
Maintaining Mullet Key Station		464 19	3,961 03	4,117 71	8,542 93
Additions to Mullet Key Station			379 89	1,022 50	1,402 39
Repairs to Mullet Key Station				447 26	447 26
Insurance			337 25	309 75	647 00
Interest on money			224 48		224 48
Case "Soli Deo Gloria"			593 02		593 02
Telephone			55 73	60 00	115 73
Office safe			194 22		194 22
Case of leprosy at Key West			30 00	125 00	155 00
Erecting Boca Grande Stat'n				1,185 00	1,185 00
Maintaining Boca Grande Station				2,034 47	2,034 47
Building at Sarasota				102 50	102 50
Hospital at Mullet Key				45 00	45 00
Erection M. K. ballast crib				9,581 66	9,581 66
Miscellaneous	17 50	10 00		45 00	72 50
Totals	$11,405 25	$40,406 08	$23,175 87	$30,777 47	$105,764 62

Digitized by Google

STATEMENT OF CURRENT EXPENSES AND PERMANENT OUTLAY.

	Current Expenses.	Permanent Outlay.
Per diem and mileage expenses of members	$2,881 00	
State Health Officer's salary	11,306 47	
State Health Officer's traveling expenses	2,951 82	
Clerical assistance	3,959 59	
Attorneys' retainers	1,325 42	
Inspectors' salaries	5,436 57	
Office rent	945 00	
Office furniture		488 42
General Office expenses	871 18	
Printing and stationery	2,211 87	
Printing annual reports	440 00	
Official telegrams	350 36	
Yellow Fever cases at Sanford		995 78
Purchase of steamer "Missoe"		5,000 09
Alterations to "Missoe"		4,251 62
Repairs to steamer "Missoe"	2,174 33	
Maintaining steamer "Missoe"	11,088 61	
Yellow Fever cases at Key West		764 21
Station at Port Tampa	27 35	
President's trip to Charleston	28 30	
Packing camp equipage	11 15	
Dr. Burroughs' trip to St. Augustine	18 70	
Draughting plans		199 00
Boat hire	358 00	
Erecting Mullet Key Station		21,697 87
Salary of supervisor of const		908 33
Maintaining Mullet Key Station	8,542 98	
Additions to Mullet Key Station		1,402 39
Repairs to Mullet Key Station	447 26	
Insurance	647 00	
Interest on money borrowed		224 48
Case "Soli Deo Gloria"		598 09
Telephone	115 78	
Office safe		194 22
Case Leprosy at Key West		155 00
Erecting Boca Grande Station		1,185 00
Maintaining Boca Grande Station	2,084 47	
Building at Sarasota		102 50
Hospital at Mullet Key		45 09
Erection Mullet Key Ballast Crib		9,381 66
Miscellaneous	72 50	
Totals	$58,246 11	$47,518 51

Statement of Quarantine Fees Collected since Organization of Board.

(From May, 1889, to February 29, 1893.)

Disinfection fees received at Port Tampa Station, 1889	$ 201 50
Disinfection fees received at Port Tampa Station, 1890	69 25
Inspection and disinfection fees received at Mullet Key Station, 1891	3,642 50
Inspection fees received at Punta Gorda, 1891	25 00
Inspection fees received at Braidentown, 1891	5 00
Inspection and disinfection fees received at Mullet Key Station, 1892	4,274 25
Inspection fees received at Punta Gorda, 1892	40 00
Total quarantine fees collected by Board to date	$8,257 50

Digitized by Google

SMALL POX AT JACKSONVILLE, MARCH, 1893.

Under date of March 6th, 1893, Dr. C. J. Burroughs, Health Officer of the Board of Health of the city of Jacksonville, made the following report to the State Board of Health:

"I herewith advise you of a case of Small Pox now under treatment in St. Luke's Hospital. The patient, John Riley, aged fifteen years, was brought here by the Agent of the Children's Aid Society, suffering, as stated by said agent, with cold and fever; having just arrived from New York and taken sick *en route*. It was not until after his arrival (several hours) that the eruption made its appearance. The boy stated that he had been in a house where some one was sick with Typhus Fever and had been removed and kept under observation for some time. The eruption at first was characteristic of that of Typhus but later showed that of Small Pox. An examination of the arm developed a recent attempt at vaccination, which had been a complete failure. We have certainly reason to believe that the boy had been exposed to Small Pox instead of Typhus and had then been vaccinated."

"As soon as the eruption was observed, the boy was taken from the wards of the hospital and placed in a building outside, where he is now being cared for. His condition to-day is good. The room occupied by patient has been properly attended to and other precautions observed. You will be advised further on the subject."

The following "confidential" notification of the existence of a case of contagious disease in the State was at once sent to each County and State Board of Health:

"You are notified that a case of Small Pox exists at Jacksonville, Florida. The patient, one John Riley, aged fifteen years, was brought to Jacksonville, in company with twelve other children, March 3d, by an Agent of the Children's Aid Society. The boy was taken sick *en route* from New York with a cold and fever. On arrival at Jacksonville, admission to St. Luke's Hospital was applied for and

Digitized by Google

obtained. Several hours after arrival in the city and admission to the hospital, an eruption made its appearance. The boy stated he had been an inmate of a house in New York in which Typhus Fever had been discovered; that he had been removed, kept under observation for a time and then discharged, without having been sick. The eruption was at first characteristic of Typhus Fever, but later indicated Small Pox. Examination developed a recent attempt at vaccination, which had been a complete failure. It is therefore probable that it was Small Pox and not Typhus which caused his removal from the infected house. As soon as the eruption was observed the boy was removed from the wards of St. Luke's Hospital and isolated. Every precaution was at once taken."

"In view of the fact that this boy came to Florida in company with twelve others, who were taken directly to Ocala, there to be distributed throughout the State, wherever homes had been obtained for them, it behooves all city and county health authorities to be on the *qui vive* and to report immediately to this office any suspicious circumstances. You will be further advised in regard to this matter. This information is strictly confidential."

In addition to this sealed circular-letter, the Board of Health of Marion County, in which county the city of Ocala is located, was specifically communicated with, as follows:

"You are confidentially informed that more or less suspicion attaches to a party of twelve boys, brought to Florida by the Children's Aid Society, of New York. They passed through Jacksonville, bound for Ocala, last Friday, leaving one of their number here, ill with a disease similating Small Pox in many of its symptoms. You are thus advised that your Board may be informed of the past history of these children, in the event any of them should be taken sick while in your midst. Ocala is understood to be the distributing point from whence they will be sent to homes in various parts of the State. Until you are further advised from this office, I would counsel the greatest circumspection in dealing with the subject. Unless some of the party are now in Ocala and unwell, I would not advise your taking any decisive action. Simply keep them under your eye."

Digitized by Google

No "suspicious" case has been reported from Marion county, or any other portion of the State. As was thought probable, at the time, the danger of Riley's companions having contracted the disease from contact with him, was slight, as it had not fully developed at the time of his arrival in Jacksonville.

Under date of March 21st the City Health Officer reports as follows, as to the condition of the case in Jacksonville:

"In reply to your letter of the 20th instant, I will state that sickness has prevented my giving you my views of the boy's present condition, from personal observation, but I am informed by the Resident Physician that he is convalescing nicely, with the prospect of being discharged shortly. Of course, all necessary precautions will be observed."

YELLOW FEVER ON SCHOONER "EVA B. DOUGLAS."

On August 5th, 1892, the State Health Officer on board the quarantine tender "Missoe" received the following communication from Dr. D. M. Echemendia, physician in charge of the Mullet Key Quarantine Station:

"I have the honor to report the arrival at this station yesterday of the four-masted schooner "Eva B. Douglas," Capt. Letts, four days from Havana, and bound for Punta Gorda, with a crew of nine men, all white but one. This vessel lay in Havana twenty-four days and three of her crew were taken to the hospital with Yellow Fever; the last one eleven days ago; taking with them their clothing. Personal inspection shows the vessel to be sound with no soft wood and clean all over, save for some coal dust in the lower hold; bilge without odor and clean and no ballast. The nine men are healthy at present. Vessel has been thoroughly fumigated and disinfected and held for observation; anchored at convenient place out of the way of other vessels. The hold will be whitewashed before discharge."

The following orders were at once dispatched to the quarantine station:

Digitized by Google

Quarantine Steamer "Missoe,"
August 5th, 1892.

Dr. D. M. Eschemendia, Physician to Mullet Key Quarantine Station:

DEAR DOCTOR—Replying to your favor of the 4th instant, I desire that you hold the American Schooner "Eva B. Douglas" at least ten days from date of disinfection, for observation. You will remember the case of the captain who died two weeks after leaving Havana, last year, at the Government Quarantine Station at Chandelieur Island. If the captain demurs you might show him the history of this case. I will be down to the Station to-morrow.

The State Health Officer arrived at the Quarantine Station on the afternoon of the 6th, and on the following morning, August 7th, made this report to the President of the State Board of Health:

"*Hon. W. B. Henderson, President State Board of Health, Tampa, Fla.:*

"DEAR MR. HENDERSON—I regret to report to you that the captain of the "Eva Douglas" (a four-masted schooner, six years old; American) developed Yellow Fever on board of her yesterday. The vessel is laying in the bay in quarantine. He was taken sick on the afternoon of the 5th, but did not report to Dr. Echemendia until yesterday morning. The doctor ordered some of his urine and an hour after my arrival it was procured and showed by test one-third by volume albumen. I immediately went aboard of the vessel and the case was then so plainly marked as to admit of no doubt. I ordered the first mate to take the vessel to Dry Tortugas and expected her to leave at daylight this morning. It was too late yesterday for her to get under way when the case was discovered. The order was given verbally and afterwards in writing. In order to be as humane as possible, I detailed Capt. Bahrt as nurse to accompany the vessel to Dry Tortugas and to nurse the captain, giving him medicine and general directions for use. Capt. Bahrt went on board at daylight but found the first mate sick and one seaman and informs me it is impossible to work the vessel with the remainder of the crew, the second mate being incapacitated from doing anything by reason of a severe fall down the main hatch a few days ago. I wrote Capt. Bahrt

Digitized by Google

if in his judgment as a mariner it was impossible to move the vessel, to take her to the opposite side of the bay, under the point of Egmont, where there is good anchorage, and out of the track of travel and to the leeward of the Station. Capt. Bahrt decided he could not go to sea and endeavored to move the vessel. The wind is ahead and not making sail enough to manage her she nearly drifted ashore to the leeward of the Station. As soon as possible I will have him move. I have just this moment come from the vessel and found the captain with fever quite high and very restless; mate very sick, the engineer and a seaman commencing to be sick. The mate and the last two men were taken between sundown last night and this morning. It was just nine days from Havana to the captain's seizure. The vessel was disinfected thoroughly here on her arrival on August 4th. In view of the fact that there are a number of cases on board and occurring almost simultaneously I have concluded to treat them all on board and not attempt to move them ashore—in fact, if the captain is taken ashore or moved he will die. I have done all I possibly can to humanely get rid of this vessel and have failed; now the best I can do is to prevent any of the infection getting ashore and I can see no reason why it should be communicated. I will stay here and use all precautions. I would like to have two Yellow Fever nurses and some medicine and authority to hire a naptha launch for the period that may be necessary to keep the vessel isolated. The distance will be too long to row. If you approve of these suggestions, please inform Capt. Russell and he will attend to the matter of getting nurses and launch. There has been no communication between the "Douglass" and any other vessel now in quarantine. Hurriedly yours, etc.,

(Signed) JOSEPH Y. PORTER,
State Health Officer.

"P. S.—A powerful Pensacola tug would be just the thing to tow this vessel to Tortugas. I doubt if the Cutter can do it. The "Douglas" is a four-master 1,039 tons. I have wired the Revenue Cutter "McLane" at Cedar Keys as follows: 'Request you to tow at once from here American schooner "Eva Douglas" to Tortugas; captain and three men sick." If you think proper you can wire Dr. Anderson to send a tug here from Pensacola.

Digitized by Google

Captain Russell thinks we can manage to use "Missoe" so never mind about launch. Yours, J. Y. P."

Later the same day the following was forwarded to the President of the State Board of Health, Tampa, Fla.

"*Hon W. B. Henderson, President State Board of Health, Tampa, Fla.:*

DEAR SIR—I regret to have to report to you that the American four-masted schooner "Eva B. Douglas," from Havana for Charlotte Harbor, Fla., is in quarantine five miles from this Station, with the captain and three seamen, including the first mate, sick on board with Yellow Fever.

The "Douglas" was in Havana twenty days at the Taliapiedra wharf, on the Havana side. During the vessel's stay there she sent three men to the hospital with what her Consular bill of health states "proved to be Yellow Fever." On her arrival at this Station on the afternoon of the 3d instant, her crew were apparently in good health and were mustered "well."

The arrival of the vessel was reported to me at Port Tampa on the 4th by Dr. Echemendia, the physician of the Station, who stated in his report that he had thoroughly fumigated the hold, cabin and forecastle of the vessel with sulphur dioxide; burning two hundred pounds of sulphur and had washed the vessel with solution of bi-chloride of mercury. Besides this the bedding, clothing and effects of the captain and crew had been subjected to steam disinfection of 230° F. of twelve pounds pressure. The vessel was then anchored off the Station in quarantine for observation. On the afternoon of the 6th inst. I arrived at the Station and learned from Dr. Echemendia that Capt. Letts (Captain of the "Douglas") had reported that the afternoon previous he had experienced a chill, some fever and sweating, but was all right that morning. I rowed off to the schooner soon afterwards and found on examination that the captain had high fever, slow pulse, injected eyes and albuminous urine: in fine, the characteristic symptoms of Yellow Fever. No other cases were found at this visit. The first mate (Mr. Miller) was ordered to take the vessel to the United States Government Quarantine Station at Dry Tortugas and Captain Bahrt, assistant at this Station, was detailed as nurse, with medicines and directions, to accompany the captain. As the wind and tide was un-

Digitized by Google

favorable the "Douglas" could not sail that afternoon. On the next morning's visit (to-day) I found the captain very ill and the first mate and two seamen sick. It was impossible then to send the schooner to sea, and as the infection of the crew promised to be general I determined to treat the cases on board. Accordingly the "Douglas" has been moved five miles from this Station and no communication is had with her except through myself, and I am in quarantine at this Station. I have an acclimated crew at the Station and therefore there is not the slightest possible danger of communicating the disease to others or elsewhere.

You may rest assured that I will take every precaution necessary, and at the same time, care for the sick under my charge in a humane and christian manner. Doubtless there will be sensational rumors in your midst and there will not be wanting panicky persons, doing much talking and frightening the timid. To all such I beg that you will say that this Station was built to take care of such emergencies as this and that to care for this class of infected vessels and vessels that come from suspicious ports is just what we are here for. Therefore, there is no cause for alarm, and to engage in senseless talk and to encourage fears is not only unwise but damaging to the State. The Captain and crew contracted the disease in Havana. It will be noted that the vessel left Havana on July 30th, and that the Captain and men were taken sick seven and eight days respectively after leaving that port—dates within the incubative period of Yellow Fever. Please send me two Yellow Fever nurses. Very truly yours, etc.

(Signed) JOSEPH Y. PORTER,
State Health Officer.

The following letter was in reply to the foregoing and fully explains itself:

Tampa, Fla., August 8th, 1892.

Dr. J. Y. Porter, State Health Officer, Mullet Key Station, Fla.

DEAR DOCTOR—Your favor of the 7th instant, informing me of your having four cases of Yellow Fever on board the schooner "Douglas" was brought over to me by Captain Russell last night. I think that you have done all that you could and your proposed course the best under the circum-

Digitized by Google

stances. I shall not wire for the tug from Pensacola, as I feel sure that under your personal attention there is but little, if any, danger of the fever getting ashore. And it will be far better for the sick and much less expensive to keep them where you have them; besides, it is not improbable you will have other vessels coming to you in the same condition. Therefore, I suggest that we get ourselves in shape as fast as possible to take care of them, on board, in the vicinity of the Station. I am sending you two colored nurses who claim to have had experience in nursing Yellow Fever patients. I have promised them three dollars per day. They are to remain as long as you want them. I find that I can get others (colored) and I think that white men can be procured if needed. I trust that you will keep me fully posted and advise me of your wants, which I promise you shall be supplied as early as possible. The town is full of wild rumors, and I think it might be well for you to address me a short communication briefly stating the situation, to be given to the press, with the assurance that every possible precaution was being taken to prevent its spread. Yours truly,

(Signed) W. B. HENDERSON,
President State Board Health.

On August 8th, the following "Confidential" communication was sent out from the office of the State Board of Health at Jacksonville to all City, County and State Health Authorities informing them of the condition of affairs at Mullet Key:

"DEAR SIR—You are informed that the American four-masted schooner 'Eva B. Douglas,' Capt. Letts, arrived at the State Quarantine Station, Mullet Key, Tampa Bay, Florida, on the evening of August 3d, four days from Havana, Cuba; was thoroughly disinfected on the 4th and placed in quarantine in the Bay, under observation, and having no communication with other vessels. On the afternoon of the 6th the captain was found with high fever and examination proved that it was Yellow Fever. The vessel was ordered to proceed to the Dry Tortugas Refuge Station, but the mate and two seamen were taken sick that night (the 6th) and the vessel could not be sent to sea. The vessel has been anchored five miles to leeward of the

Digitized by Google

Station, out of the track of commerce and no communication is allowed with her, nor has there been since sickness was discovered, except through the State Health Officer. A competent nurse has been placed on board and as soon as towage can be procured the vessel will be sent to the Government Refuge Station at Dry Tortugas.

"No danger threatens, and on cessation of fever and before pratique is given her from this Station she will be thoroughly fumigated. You will be advised from time to time. This letter is confidential."

The following correspondence explains itself:

Mullet Key Quarantine Station,
August 9, 1892.

Hon. W. B. Henderson, President State Board Health, Tampa:

DEAR MR. HENDERSON—Yours of the 8th came safely to hand. I am much obliged for your expressions of confidence and approval of my course taken towards the schooner "Eva Douglas." So far I have utilized only one of the nurses sent me and have detained the other at the Station. Captain Letts has taken a great fancy to Capt. Bahrt and I have left him on board for the present. The sick were doing well on my visit yesterday afternoon. The captain is the worse off but I hope to pull all through safely. If you can arrange to send the 500 pounds of ice on Friday by the "Kissimmee" I will be obliged. The captain of the "Douglas" authorizes any necessary expense.

Yours hastily,

(Signed) JOSEPH Y. PORTER,
State Health Officer.

Quarantine Station, Mullet Key,
August 10, 1892.

Hon. W. B. Henderson, President State Board of Health, Tampa, Fla.:

DEAR MR. HENDERSON—Everything is progressing well. The captain of the "Douglas" was somewhat better yesterday, but weak, and today will be the critical period. The mate had very high fever yesterday afternoon, but the balance are better. Will you kindly send me by the "Kissimmee" tomorrow (I will send the "Missoe" to meet her) the inclosed order. Instead of sending 500 pounds of ice on Friday, in bulk, please divide it, and send

Digitized by Google

200 pounds tomorrow and 200 pounds Saturday; that will even up better. I keep steam up on the "Missoe" and it is very easy for her to run across the bay and meet the "Kissimmee." Two "tramp" steamers arrived yesterday; one for Punta Gorda and the other for Tampa.

Yours truly, etc.,
JOSEPH Y. PORTER,
State Health Officer.

Tampa, Fla., August 10, 1892.

Dr. J. Y. Porter, State Health Officer, Mullet Key, Fla.:

DEAR DOCTOR—Your two favors of the 9th and 10th at hand. I am very grateful that things are progressing so favorably with you. The medicines and ice will go forward by the "Kissimmee" tomorrow and Saturday. You will doubtless wonder why the press of Tampa contained so much Yellow Fever news in advance of your report of yesterday. I stated in my note of the 8th, that the town was full of wild reports, they continued to increase until some of the more timid citizens thought seriously of leaving the place, on account of the fever. Some of the newspaper people came to me and requested that I give them the facts for publication. Believing that it would be best, I complied, though I notice some errors, as published. I am glad to state that the result is as I anticipated; all is quiet, and I hear only expressions of confidence in your ability to keep the fever out of Tampa. Some even going so far as to say that they are glad you have had the opportunity of demonstrating the wisdom of the Governor in creating a State Board of Health, etc., etc. * * * *

Yours truly,
(Signed) W. B. HENDERSON.

Mullet Key Quarantine Station, Tampa Bay,
August 11, 1892.

Hon. W. B. Henderson, President State Board of Health, Tampa.

DEAR MR. HENDERSON—It is painful to have to report to you the death of Captain Letts, of the schooner "Eva Douglas" He died at 4 A. M., of Uræmic Poisoning, as sequence of Yellow Fever. When I wrote you yesterday morning I had not been off to the schooner, and therefore was hopeful of the captain's recovery, from favor-

Digitized by Google

able symptoms of the afternoon previous. He commenced to fail yesterday about 10 A. M., when his kidneys failed to act and the end was in convulsions about 4 this A. M. His fever left yesterday afternoon but there was no reaction. I have arranged the burial on Anna Maria Key as follows: Will send off coffin and my men will be towed to Anna Maria Key to dig grave; when completed they will be towed back in our boat and set adrift; Captain Bahrt, with schooner's boat, corpse and part of the crew able to handle the coffin will be towed to Anna Maria Key and will bury the captain and will then be towed back to the schooner. Capt. Bahrt will take the mattresses, blankets, carpets and rugs, as well as everything woolen used by the captain, with the body when he goes to bury it and will afterwards burn these effects. No more ice or stores are needed. I have sent a wire to the owner of the vessel.

Very truly yours,

(Signed) JOSEPH Y. PORTER,
State Health Officer.

Mullet Key Quarantine Station,
August 12th.

Hon. W. B. Henderson, President State Board of Health, Tampa.

DEAR MR. HENDERSON — At my morning's visit today to the "Douglas" I found one of the men with slight fever. With the exception of a negro seaman, shipped in Havana, this case today completes the crew. The first mate is clear of the fever today and up, but quite weak. The second mate had the fever in Rio some years ago and has not been sick since the arrival of the schooner here. As previously reported, he fell through the main hatch just before the schooner reached here and was pretty badly shaken up, but with no bones broken. A young Norwegian sailor says he had Yellow Fever in Santos six months ago. The steward was treated for Malarial Fever (?) and was sick, very sick, he says, while the vessel lay at the dock at Havana. He and the Norwegian have not been sick since arrival. The balance have been sick since, except the negro sailor, and I am inclined to think he has had a seizure elsewhere; of course this is conjecture only. The nurse that I detained here at the Station and did not send to the schooner and has had no communication with

Digitized by Google

her, will be discharged this afternoon and sent up in the "Kissimmee" with instructions to report to you that you may see him. I have paid him $15.00 for five days. He has done nothing, but was here in case I needed him. Capt. Bahrt was relieved last night from the "Douglas" in the following manner: a boat was towed over by the "Missoe" to the schooner, Capt. Bahrt and his few effects placed in the boat and towed back; he in the boat. Off the Station he was cast loose from the "Missoe" and he rowed in; taking off his clothes in the small boat he jumped overboard for a long swim. On the "Approach" he took a soap bath and put on clean clothes. The clothes that he had on with his other effects had with him on the schooner were placed in a strong solution of bi-chloride of mercury and afterwards subjected to steam disinfection 230° F. and sulphur gas of strength of 15 per cent. I think he is safe. The colored nurse now on the "Douglas" will be treated in similar manner when he is relieved.

Dr. Burgess writes me from Havana that the "Eva Douglas" and the "Emerson" another schooner in here from Havana, evidently had Yellow Fever on them and should be regarded as suspicious although there is Malarial Fever prevailing at the Taliapiedra wharf where these vessels were lying. As a matter of interest I enclose you the sworn statements of the captains of these vessels with the Consular bills of health attached. When through with them please send to the office in Jacksonville. The "Emerson's" crew are negroes; captain, mate and cook, white. The "Emerson's" time of detention will be up on Sunday. She will then have been sixteen days from Havana and eleven days from date of her disinfection after arriving here. I shall bring her into the wharf tomorrow morning and subject her to a second disinfection and fumigation. Of course this must be without charge. The captain of the "Emerson" makes no objection to this procedure. He says that a man is deserving of anything that goes to Havana during the summer. The schooner "John R. Bergen" left Havana on the 8th for this Station. Dr. Burgess designates her as suspicious. She was at the same wharf as these other two vessels, the "Emerson" and "Douglas." I enclose a small order for tobacco for the mate and convalescent men. Please do me the favor to have the mosquito bars sent as soon as possible. The mos-

Digitized by Google

quitoes are bad even off as far as the "Douglas" and the sick need them badly. I will keep you advised of our situation here as often as the mail facilities afford.

Yours truly,
(Signed) JOSEPH Y. PORTER,
State Health Officer.

The following extracts are from the correspondence on the subject, a reproduction of the whole of which would make this report too voluminous:

"The captain of the Revenue Cutter "McLane" wired in answer to my request for him to tow the Douglas to Tortugas that he could not do so without instructions from the Secretary of the Treasury. All of which goes to prove that if we are to be protected from the introduction of contagious disease into Florida, we must do it ourselves and not rely on the United States Government."

"There is nothing of especial moment to report at this writing (August 15th) in regard to the schooner 'Douglas.'"

"My morning's visit finds the seaman mentioned in last evening's letter, quite sick. I cannot tell how the case will turn out, as it is impossible, even with a nurse on board, to make the average sailor obey instructions in sickness. I found the man on deck and barefooted. His kidneys are not involved, which is a favorable symptom. The first-mate has a sub-normal temperature today, which confirms my diagnosis as first made, although the course of the sickness was somewhat irregular."

"Only one man now (August 15th) sick with fever. The rest are convalescing. They need much strengthening food and I hope the beef written for Saturday may arrive by the 'Kissimmee' this morning."

"My visit yesterday (August 16th) to the schooner 'Douglas' found the seaman John Neilson (last white case) without fever but very weak. He will convalesce now with care taken. I don't think the Gibralter negro will be sick. He has passed, or nearly so, the incubative period. Capt. Anderson, of Port Richmond, Staten Island, N. Y., who appears to be the managing owner of the 'Douglas' writes me, under date of the 13th, that if, in my opinion, it is deemed best to send the schooner direct to New York from here, after I have disinfected her thoroughly, he will do so. The superintendent of the Peace River

Digitized by Google

Phosphate Company writes that his company may annul or cancel the charter of the 'Douglas.' I have communicated this fact to Capt. Anderson, and have approved of his idea of sending the vessel direct North from here. Although she will be safe enough to take cargo anywhere after I get through with her.

"The 'Douglas' is undergoing second fumigation today (August 23rd). She has been literally flooded with bichloride of mercury solution. At present the men are discharging their clothes and putting on freshly disinfected articles. The captain asked me this morning if he left here for Philadelphia when would I let him off? I said Saturday or Sunday. 'But if I go to Punta Gorda, what then?' said he. 'September 15th,' I answered, 'If you are well.' He will go to Philadelphia and leave Saturday or Sunday."

Digitized by Google

RULES AND REGULATIONS

—FOR—

Inter-State Quarantine and Medical Inspection.

Under authority granted by Section 12 of the Act creating a State Board of Health, approved February 20th, 1889, the State Board of Health of Florida hereby adopts the following rules and regulations governing inland or inter-State detention and inspection of passengers, baggage and freight from infected points:

SECTION 1. Whenever Yellow Fever, Cholera, Small Pox or other contagious or infectious disease shall exist or prevail in any city or town of any State of the United States, Mexico or Canada to such an extent as may be adjudged by the State Health Officer to endanger the health of the inhabitants of the State of Florida, through railway, stage, steamboat or other medium of inter-communication, then all individuals entering the State of Florida from such infected locality by means of such railway, stage and inland water navigation company shall be detained at such points on or near the border line of Florida, as may be selected by the State Health Officer, for observation of passengers and treatment and isolation of sick, and for fumigation of baggage, freight and mails.

SEC. 2. Any individual or individuals found upon any railway train, stage coach, steamboat or other conveyance, from any city, town or place of any other State of the United States, Mexico or Canada, suffering from any epidemic, contagious or infectious disease, and all such persons who, in the opinion of the medical inspector at any quarantine station may reasonably be suspected of having been subjected to infection or contagion from such individual or individuals, shall be detained for treatment and observation as specified in Section 3.

SEC. 3. All passengers detained under provisions of Sections 1 and 2 will be detained for such treatment and observation not less than ten days, or for such time as the

Digitized by Google

State Health Officer shall deem necessary for the safety of the public health.

SEC. 4. No railway or stage line, or any person, company or corporation shall be permitted to bring passengers from any city, town or place in any other State of the United States, Mexico or Canada, where epidemic, contagious or infectious disease exists, to any city, town or place in the State of Florida, without undergoing such detention as is specified in Section 3.

SEC. 5. Persons desiring to enter the State of Florida on any railroad, steamboat or stage coach, or otherwise passing any quarantine station, will be required to produce to the inspecting officer, duly appointed by the State Health Officer, a certificate signed by the Mayor, under the corporate seal, if said person is from a municipal corporation, and if not from a municipal corporation, then a certificate from a justice of the peace, that that said person has not been exposed, either in person or baggage, to infection or contagion within fifteen days before the date of said certificate; Provided, Said certificate shall bear date not more than five days prior to such presentation; otherwise said person or persons and his or her baggage will be detained at such quarantine station as provided for in Section 3.

SEC. 6. No bedding, household goods or rags shall be brought from any city, town or place of any other State or country where epidemic, contagious or infectious disease exists, into the State of Florida.

SEC. 7. No personal baggage of the description usually carried in trunks shall be brought into this State from any city, town or place of any State of the United States, Mexico or Canada, where any epidemic, contagious or infectious disease exists, without first being subjected to thorough disinfection by an agent of this Board by superheated steam, dry heat of high temperature or medicated vapor, according to the nature of the article.

SEC. 8. All day, sleeping or other railroad cars, stage coaches or other conveyances, steamboats or other craft on which any epidemic, contagious or infectious disease is found to exist, and all through sleeping cars coming from infected points, shall be detained and thoroughly disinfected by an

*4 sbh 16pp

Digitized by Google

agent of this Board before being allowed to enter the State of Florida.

SEC. 9. No freight, mail or other goods, not heretofore provided for, shall be brought into this State from any city, town or place of any other State of the United States, Mexico or Canada where epidemic, contagious or infectious disease exists, without first being thoroughly disinfected by an agent of this Board, except such freight as may in the opinion of the State Health Officer be deemed free from danger of infection or contagion.

Adopted September 17, 1892.

Digitized by Google

PROPOSED LEGISLATION.

A Bill to be Entitled an Act to Provide for the Collection of Vital Statistics in the Several Counties of the State of Florida.

Be it Enacted by the Legislature of the State of Florida:

SECTION 1. That in each County of the State of Florida the County Judge thereof shall keep a record of births and deaths of persons occurring within the county, numbering, recording and indexing the same in books to be kept exclusively for that purpose.

SEC. 2. The record of births shall note in separately ruled columns the lineal number of entry, date and place of birth, sex, race or color, name of child (if any), name of father, maiden name of mother, race or color of father and of mother, residence of parents, birthplace of parents, occupation of father, legitimacy or illegitimacy of child, whether born alive or dead and date of record.

SEC. 3. Record of deaths shall note in separately ruled columns lineal number of entry, date of death, name of deceased, sex, age, condition (whether married, single or widowed), cause of death, race or color, place of residence, length of residence in Florida, place of birth, place of burial, medical attendant (if any) and date of record.

SEC. 4. In the matter of births it shall be and is hereby made the duty of every physician, when one is in attendance, and when not in attendance, then each midwife or householder or master of a ship or boat, or superintendent or keeper of an asylum, prison or home, in whose house, vessel or institution the birth of an infant may occur, also of the father or mother surviving, or of any person or persons who were present at or cognizant of the birth of a child, living or dead, in the State of Florida, within fifteen days thereafter, to report to the County Judge of the county in which said birth occurs all facts relating thereto hereinbefore enumerated and made material, of which they may have knowledge.

SEC. 5. In the matter of deaths it shall be, and is here-

Digitized by Google

by made the duty of such persons as are designated in the preceding section, within fifteen days after the occurrence of a death of any person dying in Florida, to report the fact to the County Judge of the county in which the death occurred, together with such particulars as are hereinbefore mentioned and made material, and are within the knowledge of said parties. If a physician is in attendance it is made his duty to furnish the certificate of death, for burial, and to report the same to the County Judge.

SEC. 6. That any person hereinbefore required to make reports of births or deaths, coming to their knowledge, who shall fail or refuse to do so within the time prescribed by law, shall be deemed guilty of a misdemeanor, and, upon conviction thereof, shall be fined in a sum of not less than one dollar and not exceeding twenty-five dollars, and required to pay the cost of prosecution.

SEC. 7. Books with printed heads, and ruled so as to comply with the requirements of this Act, for the entry of record of births and deaths, shall be supplied the several County Judge's offices by the State Board of Health, within sixty days from the passage of this Act.

SEC. 8. On the second Monday of each and every month, it shall be, and is hereby made the duty of each County Judge, to transmit to the State Board of Health, a certified tabulated statement of births, marriages and deaths, occurring in their respective counties during the preceding month, together with other data herein provided for, and such report shall be made on printed forms to be supplied by the State Board of Health, on the requisition of County Judges.

A Bill to be Entitled an Act to Create and Establish a State Bureau of Vital Statistics for the State of Florida and to increase the efficiency of the State Board of Health.

Be it Enacted by the Legislature of the State of Florida:

SECTION 1. The State Board of Health of Florida shall compile accurate vital statistics of marriages, births and deaths occurring within the State, arranged by Counties and incorporated cities, with statements of the prevailing diseases and all information of a medical or sanitary nature that may be of value in the preservation of the pub-

Digitized by Google

lic health, and for this purpose a State Bureau of Vital Statistics is created, to be under the supervision of the State Health Officer, as Registrar of said Bureau, with office at the office of the State Board of Health. The said Registrar of Vital Statistics shall formulate, print and furnish suitable blanks for collecting and compiling such statistics, to be paid for by the State Board of Health, and he shall as often as once a month tabulate and publish such statistics and furnish copies of the same to the incorporated cities within the State and gratuitously distribute copies to persons and to other States of the Union as may be deemed advisable by the State Board of Health. Provided that nothing in this section shall be construed as increasing the levy now authorized for the State Board of Health fund.

SEC. 2. The State Board of Health shall have its office at some convenient and suitable point, where shall be kept the records and papers of the Board and of the State Bureau of Vital Statistics. The regular meeting of the State Board of Health shall be on the second Tuesday in February of each year.

SEC. 3. The State Board of Health shall be increased in members by the addition thereto of the State Health Officer, as *ex officio* member; and the President of the State Board of Health and the State Health Officer shall constitute an executive committee of said Board, and shall have full powers, in emergencies, *ad interim* of the regular meetings of the Board, to make such rules and regulations and do all other things that may be necessary to prevent disease and protect the public health, not inconsistent with the Act creating the State Board of Health, approved February 20th, 1889, or with the provisions of this Act; reporting their actions to the Board at the next meeting for approval; *Provided*, That a meeting of the Board may be called at any time by the President on the request of two members.

SEC. 4. It shall be the duty of the State Board of Health to organize as a corporation under the general incorporation Acts of the State of Florida, in order to legally acquire control, on behalf of said State, of such property as said Board may require for the preservation of the public health.

SEC. 5. The State Health Officer shall have the general administrative and executive control of all the mari-

Digitized by Google

time and domestic quarantine systems of the State. He shall have power to make arrests without warrant for any violation of the quarantine rules and regulations of the State Board of Health or the executive committee of the same, after they have been daily promulgated. He shall also have power to deputize sanitary agents for that purpose. In all such cases the person or persons arrested for violating the quarantine and sanitary rules aforesaid shall be surrendered without delay to the custody of the nearest sheriff and formal complaint made against him, her or them in accordance with law.

SEC. 6. It shall be duty of the State Health Officer to visit such cities and towns or other places in the State of Florida and investigate their sanitary condition, whenever in his judgment or in the opinion of the President of the State Board of Health, or upon request of the authorities or three property holders, it may be deemed necessary, and it shall be his duty to condemn in any of said cities or towns or other places whatsoever in his judgment shall be likely to produce, cause or propagate disease, and he shall give notice to the mayor and council of any such town or city or other authority, to repair, remove, cleanse or remedy the same, and if it shall not be done in a reasonable time, it shall be his duty to make a report of the same, with all the facts pertaining thereto, to the State's Attorney of the circuit court having legal jurisdiction, or to the prosecuting officer of a court of criminal record in said place or county, who shall proceed at the next term of court against any mayor or council or other authority of any city or town failing to comply with the direction of the State Health Officer; Provided, That whenever in the occurrence of any epidemic contagious disease it may be necessary for the State Health Officer, for the preservation of the public health, to destoy any property, a list or memorandum of the property condemned shall be made and valuation placed upon the same by three disinterested freeholders, one to be selected by the State Health Officer, one to be selected by the owner of the property and the third to be selected by the two freeholders already selected, before being condemned or destoyed, and the value of any private property that may be condemned and ordered to be destroyed by the State Health Officer shall be paid to the owner thereof out of any funds provided and appropriated for the expenses

Digitized by Google

of the State Board of Health, upon the certificate of said State Health Officer that said property was so destoyed, approved by the President of the Board; and provided further, that the said Board of Arbitration shall be paid by the State Board of Health for their services.

SEC. 8. All laws and parts of laws in conflict with the provisions hereof be and the same are hereby repealed.

SEC. 10. That this act shall take effect from and after its approval by the Governer.

Digitized by Google

TESTIMONY.

Taken before Congressional Committee at Havana, Cuba and Key West, Fla., in relation to immigration and quarantine.

STATEMENT OF DR. DANIEL M. BURGESS.

Senator Proctor.—How long have you been here at Havana?

Dr. Burgess.—I have been here twenty-five years.

Senator Proctor.—How long connected with the consulate?

Dr. Burgess.—Most of the time. I am United States Sanitary Inspector of the Marine-Hospital Service.

Senator Proctor.—Under the Treasury Department?

Dr. Burgess.—Yes, sir. Before that I was Sanitary Inspector for the National Board of Health.

Senator Squire.—I would ask the doctor if he has not been connected with the hospital system of Cuba, of this city particularly?

Dr. Burgess.—Yes, sir.

Senator Squire.—Hospitals belonging to the government here?

Dr. Burgess.—Not belonging to the government here; not connected with any government hospital, but with a private hospital.

Senator Proctor.—You have heard the resolutions read describing the obect of our investigation?

Dr. Burgess.—I did not hear them read.

Senator Proctor.—The purpose of our inquiry is to gain information in regard to the danger of importing infectious or epidemic diseases through immigration from the West Indies into Florida and other States, among other things. Will you please give us anything you have in mind with regard to the history of epidemic or infectious diseases being carried from this port to the United States in the past? Do you know that cholera or yellow fever have been so carried and when?

Dr. Burgess.—We have good evidence of yellow fever

Digitized by Google

having been carried from here to the States repeatedly, to different ports of the United States, to Savannah as late as 1876, to New Orleans, to Charleston, and especially of vessels arriving at New York with yellow fever on board; that has occurred often, and, in fact, at almost every seaport; at Boston, New York, Philadelphia, Charleston, Savannah, Pensacola, New Orleans, and, I think, Mobile. As to the dates of such I shall have to refresh my memory.

Senator Proctor.—If you can furnish us with any dates of statistics with regard to that we would be glad to have you submit a paper any time, while we are here, or if necessary we could give you a longer time. Can you give us any idea as to whether this has been the principal source of yellow fever transmitted to the States?

Dr. Burgess.—As a matter of opinion, almost of information, I should say it had been; I should say oftener than from any other port in the past.

Senator Proctor.—From any other port or from all ports?

Dr. Burgess.—Well, I should not hesitate to make the statement that it had been conveyed as often from this port as from all the other ports put together. I think I am safe in that statement.

Senator Proctor.—Will you tell us what means have been taken in the past, here at the port of departure, to prevent the conveying of contagious diseases to the United States, and whether those methods have been improved upon?

Dr. Burgess.—I could answer that shortly or I could answer it in detail better. I can give you a written statement.

Senator Proctor.—That will be better still. We will give the doctor time to make a written statement if that meets the views of the committee. Do you approve of that, Mr. Stump?

Representative Stump.—It would be much more satisfactory.

Dr. Burgess submitted the following in answer to the above question:—

Portion af a paper which was read by Dr. Burgess at the Montgomery quarantine conference, which answers a question of Senator Proctor.

No person is allowed to go aboard of the vessels re-

Digitized by Google

ferred to without a permit from the sanitary inspector, and no passenger can purchase a ticket or take passage who has not a health certificate from said inspector. This certificate sets forth that he is acclimated to yellow fever, either by a previous attack or by a continuous residence of several years, five or more, in towns and cities habitually subject to it in an epidemic form, or where it usually prevails endemically, and who has passed through at least one severe epidemic; or that he is a native of places frequently visited by it, and that there is practically no danger of his conveying the disease.

In cases of applicants for health certificates in whom the inspector personally knows the above conditions to exist, and that by virtue of them the person enjoys immunity from yellow fever, there is no reason why a certificate to that effect should not be given at once, or, in other words, his health certificate.

But there are numerous cases which present themselves for a certificate, in which the inspector, in order to satisfy himself that the conditions required exist, has to adopt methods of investigation to corroborate even the sworn statement of the applicant, and the details are very much as follows:

Applicants for "health certificates" in Havana can for convenience be divided into four classes, viz: Foreigners, Spaniards, foreigners who are natives of places where yellow fever occurs frequently and endemically, and Cubans.

First class; as to foreigners.—Their own statements as to length of time passed continuously in places subject to yellow fever, as well as having had the disease, etc., must be supported by the following documentary evidence: Their *cedulas* (a paper), which give a personal description of them, their age, nativity, profession and the place where they habitually reside, and passports; also certificate of the consul of their nation, to the effect that to his knowledge they have made correct statements; certificate of some well-known and respectable business house or banking institution that they are reliably informed of the length of time the applicant has passed in the tropics, and where, and as to his having had yellow fever.

If he claims to have had the disease in question, the legalized certificate of the physician who attended him must be produced, or in case he had it in a hospital, the

Digitized by Google

certificate of the director of the hospital. In addition, the person is questioned closely, and cross-questioned, in regard to the symptoms he had when taken sick and throughout his illness; how he felt and suffered; in what town he lived at the time, and who attended him; how he was nursed, and other questions, which the investigation suggests, are put.

Second class; as to Spaniards.—They must produce the documents which identify them; such as *cedulas*, passports, etc.

The certificate of the inspector of vessels, stating the time when they arrived on the island.

Another certificate, from the alcalde of the ward in which they live, saying how long they have lived there, and in case of removal, that of other alcaldes, etc. Also certificate of some respectable mercantile or banking house, stating how long they have lived in Cuba, or other provinces, and in what places. If the applicant claims to have had yellow fever, the certificate of the physician who attended him, or that of the hospital in which he may have passed through it, must be produced, with the proper seal attached.

He is questioned, as in the case of class first, what symptoms he had, etc., when he was sick from it, and in some cases satisfactory answers are given, which assist in making a decision.

Third class; foreigners from a country or locality where Yellow Fever exists in an endemic form or habitually.—The certificate of his consul stating that he has lived in such places continuously for many years or is a native of them, or, and in addition, the certificate of a commercial or banking house of good reputation, stating how long he has lived in those localities, and that he is a native of them.

Fourth class; when the applicant is a Cuban.—He must present his *cedula* for his personal identification, which also must state where he was born, his age, and where he lives. Also a certificate from the alcalde of the ward where he resides, saying how long he has lived in ward and city. Furthermore, a certificate from some thoroughly respectable and reliable source that he has lived more than five consecutive years in one of the seaports of the island. All questions pertinent to the examination must be answered candidly, upon honor, or, if deemed necessary, under oath.

Digitized by Google

The above methods are pursued with all the vigor that the case under investigation may require, until the sanitary inspector feels himself reasonably justified in giving or refusing to grant the health certificate. While not a few are refused, it is a source of satisfaction to be assured that among the several thousands who have received the health certificate and have gone to ports in the United States, in not one instance has yellow fever developed afterward.

This fact is of service in confirming the correctness of the opinion that the passengers were protected from yellow fever.

When smallpox exists at any place on the island these health assurance certificates also certify that the individual from that place is protected from that disease by a former attack of it or by successful vaccination, and that the inspector has revaccinated the individual.

Persons who have never had smallpox or been successfully vaccinated are now vaccinated and detained six or seven days to observe the result of the vaccination, and if this proves to be successful he gets his certificate, but if not successful he is vaccinated again and given a certificate to that effect, and that he is considered safe. It is but just to say in this connection that no person has been known to fall sick with smallpox after getting such a certificate.

To prevent fraud, exchange of certificates and impositions, a system of personal description forms part of the health certificate for some routes, and the passenger is confronted aboard by the inspector with the certificate. Dirty persons are required to take a bath before going aboard. The baggage of passengers must not only be clean but be known to come from houses and hotels in which there is no yellow fever or it will not be received aboard. These houses are visited to ascertain the fact. As soon as the baggage is aboard each article is taken out and separately sprayed over with a solution of bichloride of mercury, 1 part to 1,000, and trunks and other receptacles for it, which have been treated in the same manner, are put in the close, clean hold, and fumigated by the dioxide of sulphur, burning in the process from 3 to 5 pounds of sulphur to each 1,000 cubic feet. When sulphur only is used for disinfecting baggage, etc., the articles are hung up or laid loosely around so that the sulphurous acid gas can reach all parts

Digitized by Google

of them. The vessel then, without any particular detention, can and usually does proceed to sea while the sulphur fumigation is going on, the hold remaining closed as long as possible—eight hours or more.

No bedding of any description is received, or upholstered furniture, or furniture of any kind, unless it is absolutely new, is taken aboard. No article which can reasonably be suspected of being *fomites* for the conveyance of yellow fever is allowed to be shipped as freight.

The vessels are thoroughly inspected each trip in holds. engine and fire-rooms, bilge spaces, water-closets and urinals, and spaces under and around them, forecastle, glory hole, galley, pantry, cupboards, drawers and recesses, wash rooms, office-rooms, state rooms and cupboards in them, apartments for second-class passengers and such conveniences as may be provided for them, the bedding of the ship, the condition of decks and other surfaces; in short, all parts of the ship. Good ventilation in all apartments must be maintained (when fumigation is not going on) by all the means made for that purpose in the construction of the vessel and by wind-sails.

When the quarantine or dangerous season begins, the carpets and heavy woolens of winter use are removed.

Although the use of the best disinfectants and germicides known is continued all winter, at this time they are resorted to systematically and in much greater quantity.

All bedding, etc., in the officers' and crews' apartments are, besides the necessary washing, taken out and aired at least once a week, when the ceilings, walls and floors, and all surfaces of the rooms are sponged over or wet down with the usual mercuric solution of 1 part to 1,000, and washed with fresh water and soap.

State-rooms and all apartments for passengers are washed and treated in the same way twice a week, are always after a trip to Havana, and bedding washed, cleaned and aired. All urinals, as well as apparatus for holding them, are kept thoroughly clean and frequently washed with a solution of chloride of lime or zinc.

All other apartments in the vessel are treated in a similar manner.

All water-closets are washed two or three times daily, and much oftener if necessary, employing at this time the standard solution of chloride of lime or a strong solution

Digitized by Google

of chloride of zinc. Decks and some of the thicker and more exposed wooden floors are holy-stoned frequently, chloride of lime being used in the process.

The bilges and bilge-spaces are cleaned and sponged out every week and treated twice a week alternately with solutions of bichloride of mercury and chloride of lime.

The hold is also whitewashed weekly.

The engine room is kept clean, and the bilge underneath is cleaned every week and treated by disinfectants, while every two days clean sea water is run through the bilge-spaces and pumped out.

As far as practicable the officers and crews of these vessels are composed of acclimated persons, who are prohibited from going ashore or visiting vessels in the harbor without a special permit from the sanitary inspector, and they are individually examined before the vessel leaves the harbor for a port in the United States.

Not one of them has ever been found in the least suffering from any infectious disease now over four years. In the light of what is known of practical disinfection, and the prevention of a vessel becoming invaded by infective disease, it is difficult to see how much more could be done as the methods above mentioned comprise about all that is regarded as most useful in modern maritime sanitation. To enable the sanitary inspector at Havana to be one of the agents in enforcing these restrictions they must not only be required by the port authorities at the vessel's destination, but desired by the agents, the owners, and those interested in her welfare. Such has been the case in regard to some steamers, and such restrictions have enabled them to continue in active service, without one of their crew or one of their passengers ever suffering from infectious disease, or any reasonable suspicion, or proof that they have in any instance conveyed the specific morbific cause of yellow fever.

It is not pretended that the foregoing restrictive methods can, are, or need be carried out in the Harbor of Havana for the security of *all* ports in the United States, and particularly in winter.

The authorities in Havana are propably, as in most other ports, very sensitive to, and jealous of any approach to, or assumption of jurisdiction.

We have no treaty with Spain by virtue of which an

Digitized by Google

United States sanitary inspector is invested with any particular authority. He can, however, do very much to assist in preventing the introduction of infectious diseases into the United States by ships, because of the maritime and sanitary regulations of the ports of entry, and of the moral support afforded by the consul general of the United States, and the still more important assistance of the authorities at Washington; and, in case of danger, he can sound the note of warning.

The bill of health which all vessels should and are expected to carry is the consular bill of health, and is made out and signed by the sanitary inspector as well as by the consul. Such information is given in the document as will assist the health authorities at the port of entrance in forming an opinion of the sanitary status of the vessel and port from which she sails, and will aid in determining what treatment she should receive. It comprises the sanitary history of the ship; her sanitary condition; what her exposures have been in the harbor from which she proceeds; what has happened to her there; what measures have been taken, if any, to improve her sanitary state; sanitary condition of cargo, if she carries any, and, when she has ballast, what kind and where taken in; sanitary condition of crew and passengers, stating whether they have had sickness or not; the existence in the port of infectious diseases, as yellow fever, asiatic cholera, plague, smallpox, or typhus fever; how many cases, and how many weekly deaths from them, etc.; and all pertinent information which may assist the health authorities at the port of destination.

To enable the inspector to state intelligently as to the truth of what he certifies, it is clear that he must visit and inspect the vessel and examine the crew. Captains, agents and owners now understand this and ask him to go aboard and do whatever is necessary, that they may be provided with the bill of health. When the inspector is invited aboard it is apparent there can be no well-founded complaint of assumption of jurisdiction, however foreign the vessel may be.

He then inspects the vessel in all parts—hold, bilge, the dunnage, ballast, water closets, forecastle, cabin, etc.—and indicates what should be done.

In some instances he is asked what can be done to

Digitized by Google

make the vessel more acceptable to the health authorities at the port of destination.

There are quite a number of lines which are not only willing but anxious to do everything reasonable within their power to prevent yellow fever getting aboard, or if there is danger of its being aboard in *fomites* to disinfect and destroy the infectious agent at once.

Such lines as Ward's, Morgan's, Plant's and Alexander's are excellent examples. They not only keep their vessels away from wharves and dangerous places, but are willing to cleanse and to use disinfectants in their vessels, cargoes, ballast, bilge, etc.

Others are indifferent to exposure, sacrifice comparative safety to convenience, lay during the very dangerous season of the year at wharves, with their ship's company going any and every where they please, and say, "Oh, we will take our chances;" and that class of captains are ever ready to deny that they have had or have now any sickness aboard.

The key to the sanitary condition of the port of Havana in relation to infectious diseases lies largely in the hospitals, public and private, of which there are eight or ten.

Here the inspector is very vigilant, and here he will usually encounter the sick from vessels and can learn what ships they are from, etc. Frequent visits are made to these institutions.

From what has been stated in this paper it would seem that vessels going to the United States from the port of Havana can, for the convenience of bills of health, be classified into four different classes:

The first class, or "good," would include those vessels which remain in the open bay, keep their crews aboard, and, in short, observe rigidly all the methods of modern maritime sanitation In them the sanitary history, condition, cargo, crew and passengers are all marked good. Sailing vessels would take neither cargo, ballast nor passengers from Havana. It is believed that the most of such vessels could enter ports in the United States at any season without imperiling the health of these ports.

Second class, or "fair," includes such vessels as do not go to wharves, neither are they particular about the use of disinfectants or extreme cleanliness. These may go to

Digitized by Google

wharves during winter months, in which case they disinfect and cleanse thoroughly.

Third class, which are indicated by "fair only," or "a little suspicious," are those vessels which go to wharves but have not had yellow fever aboard in consequence. Fair only, or a little suspicious, are intended to be synonymous terms.

Fourth class—"suspicious," sometimes "evidently infected," are those which go to wharves in the dangerous season which are known or believed to be infected, or those vessels which, although in the open bay, have become surrounded by infected vessels from the wharf, and in consequence have had yellow fever occur among their crew; and in which little has been done to remedy their insanitary condition.

There is every reason to believe that many vessels, at wharves, become infected in fact, particularly Spanish vessels, which do not reveal their dangerous condition by any sickness existing or having occurred aboard, as their entire crews have immunity from yellow fever by having had it before. Other vessels on entering the harbor immediately discharge all unacclimated persons, and ship new ones only the moment they desire to leave. In such cases there can be no tell-tale incident to betray their actual condition in regard to infection.

It is found that the statements of the officers and crew of the average sailing vessel are so unreliable that the sanitary history must depend to a great extent upon the vigilance and port experience of the inspector himself. Captains have frequently declared that they had no sickness, when the inspector knew and had seen some of their men sick in hospital with yellow fever, and again confronted them aboard convalescent, but still yellow as oranges.

Instances like the following used to occur much oftener than at present:

A Spanish steamer, bound for New Orleans, applied a few years ago for the consular bill of health, presenting that of the local board, in which it was stated that all *were well aboard* and that there was no disease of an infectious or epidemic character in the harbor. I knew that the steamer had been discharging three or four days at an infected wharf, and on going aboard to inspect crew and vessel I

Digitized by Google

found the chief engineer and two men down with yellow fever. The engineer's case was a rapid and malignant one, for he was already vomiting black and wondering what it was and why he felt so weak in so short a time. The sick were all sent ashore and the engineer died the next day. Here was a vessel about to start for New Orleans with a *clean* bill of health from the Cuban or local board of health, while three of her crew were actually sick and dying of yellow fever aboard.

The unreliable character of bills of health, issuing from local boards of health in some foreign ports, subject to all the influences of social, political and commercial surroundings, which consider only the supposed interest of their own place, is well shown in such an instance as has just been narrated. It also shows that that instrument, to be of protective sanitary value, should be made out by one who not only keeps himself *aucourant* with the prevailing diseases, and particularly any of an infective character, but also with the sanitary condition of the port and the vessels therein. He also should be one whose interests and sympathies are with the people of the port of destination, who has a natural and loyal desire to assist in protecting them from the introduction of infectious and contagious diseases, and who can be held responsible to those who appointed him, and to the country which he serves. In the faithful execution of his mission he often has many disagreeable duties. Where is the sanitarian or quarantine official who at times is not criticised most unjustly and unmercifully and caluminated without sense or reason? Every captain wants what he calls a *clean bill of health*, no matter how infected the city and wharves and his vessel may be. The sickness which may have occurred aboard, and which may have resulted in death from yellow fever in hospital or elsewhere, he calls a bad cold, or the result of the bad care the sailor took of himself. etc., or anything to disguise the facts.

The sanitary inspector frankly, in the consul's bill of health, tells whether, in his opinion, the sanitary condition of the port, and vessels particularly, is good, fair, a little suspicious or suspicious and infected, and thus a hint is given to the authorities at the port of arrival, notwithstanding the principal sources of danger to legitimate shipping, and therefore to ports to which they are bound, are sufficiently indicated for all practical purposes. Standing as I do as a kind of

Digitized by Google

sanitary lookout, I cannot close this paper, already perhaps tiresome in detail, without referring to a constant source of peril from the introducion of yellow fever into the States of the South, and particularly Florida, infinitely greater than all others put together. I refer to that kind of illicit intercourse which is carried on between the ports of Cuba, principally Havana and Florida, by a class of light-draft, fast-sailing vessels which sail from there in quite large numbers. These have for their ostensible and legitimate business fishing, and they are called viveros or fishing smacks, and while they do quite a fair business in that way, they often do a more paying one in an illegitimate manner by smuggling different articles into the country on whose coasts they hover for both of the above purposes.

No dirtier or worse smelling vessels probably leave the port of Havana; their inside condition and atmosphere being eminently favorable for the reception and growth of such disease germs as thrive under the influence of heat, moisture and filth. Laying, as many of them do while here (and that for a long time frequently) at wharves notoriously dangerous, with an under deposit of sewage and fœcal pollutions, and doubtless infection, every opportunity is given the cause of yellow fever to get aboard and render the little craft a vile storehouse of infectious disease. Moreover, there is reason to believe that young men recently arrived from Spain, and totally unacclimated, are at times shipped as some of the crew.

The articles which this class of vessels can smuggle into Florida and Mexico to the greatest advantage are cigars, aguardiente, or rum, gin, wine, fruit, etc. The inducement to smuggle aguardiente and rum is very great, as the spirit which costs only 25 or 30 cents a gallon in Havana pays a duty of $2 a gallon in the United States.

The method of doing these two branches of business, viz.: fishing and smuggling, is an open secret at Havana, and the fishing fraternity, when they have a little confidence in the person to whom they are talking, say very frankly that it is not a difficult thing at all to smuggle their stuffs into Florida or Mexico, and there is but little danger in it.

These vessels clear, or rather leave port, with a simple permit to go out and fish on the high seas or along the coast. Being small of size and resembling coasters they

Digitized by Google

go out at any time (usually at night), but no one knows when or where bound.

Once outside of the Moro Castle some of them may go and fish in the waters up about Cardenas and Sagna, others to the banks of Yucatan, while a large number will try to better their fortunes in the waters and inlets of Florida. Some of those for Florida may transfer their goods to confederates among that line of keys which terminates at the Tortugas, while others will go farther up and hover around the coast of the mainland, all the way from Punta Rassa, Charlotte Harbor, up past Tampa, and even on beyond Cedar Keys.

Here they are on the alert, waiting a favorable opportunity to dispose of what they have, either to confederates or make an unlawful incursion into some of the many inlets, bayous and passes on that coast. Once inside they communicate with the people or settlements they may know, interchange visits and commodities; friends sleep aboard, articles are carried ashore, and, it is feared, infective disease brought in with them from Havana.

I am credibly informed of these methods, and that many outside of fishing and smuggling circles know of them. Captains of steamers running along the coast from Charlotte Harbor to Tampa, etc., tell me that they often see about day break this class of vessels, which they know to be Spanish, coming out of the inlets, bayous and passes. They have no business there, except to smuggle. If this smuggling was limited to articles of commerce it would be bad enough, but when terrible infective disease is smuggled into the midst of an unsuspecting people in this manner it is in the highest degree culpable.

Florida, with an extent of seacoast greater than that of any other State bordering on the Atlantic or Gulf, is more exposed by these smugglers than any other State in the Union.

A condition of things has increased this illegal business very much within the last few years. Several years ago Spain put so high a duty on the importation of live fish from the States that the many fishing smacks which, up to that time, had been doing a nice paying live-fish business from Key West and other places of Florida, were obliged to suspend business. A large portion of those little vessels were then sold to live-fish merchants in Havana, and since

Digitized by Google

then there have been not less than fifty of these light-draft, fast-sailing vessels going out of the harbor of Havana. Being nearly all built in the United States, in American waters, they are taken for American vessels till they are made to show their papers.

During that period, or the last five years, a large and rapidly increasing population has appeared in Florida, and particularly on the Gulf coast, which requires the very articles to be found in Havana.

It is well known that where there is a demand for an article the article is very sure to be obtained in some way, either by fair or foul means.

Finally, I would say, that in view of the facts stated, and as a result of my personal observation as sanitary inspector at Havana, I am decidedly of the opinion that one or more lines of steamers to Florida ports, under proper sanitary supervision, and all the restrictions mentioned in the first part of this paper, whereby danger of their conveying the disease is reduced to a minimum, will do much to suppress this illegal traffic, by transporting the articles required.

The danger of introducing infectious disease by such steamers is so small that it cannot for one moment be compared to that infinitely greater one by the smuggling by vessels referred to.

Senator Proctor.—I would be glad to have the doctor state briely now, what are the present regulations?

Dr. Burgess.—During what is regarded as the dangerous season of the year a system of certification has been adopted, particularly by the State of Florida. Florida was rather the pioneer in the matter.

Senator Proctor.—Requiring certificates to be brought from the authorities here?

Dr. Burgess.—No, sir, not from the authorities here; from a representative of the United States.

Senator Squire.—Are these three papers which I show you, blank certificates, such as you speak of?

Dr. Burgess.—Yes, sir.

The blank certificates read as follows:

HEALTH AND ACCLIMATION CERTIFICATE.

HAVANA, CUBA, ——— ——, 189—.

This is to certify, that ——— ———, a native of

Digitized by Google

———, and a resident of ———, color ———, years of age, ——, sex ———, has produced satisfactory proof to me that —— has had yellow fever or is acclimated to it by long residence in towns and cities where it has prevailed in recent years, that —— is protected from small-pox by successful vaccination or a previous attack of the disease, and that —— is in good health at the present time.

And I further declare my belief that —— is sufficiently acclimated to the diseases of the tropics, so that —— presence threatens no danger from yellow fever, cholera or small pox. ——— ———, *M. D.*,

[SEAL.] *M. H. S.*

[Form 17,]

ACCLIMATION CERTIFICATE.

OFFICE OF SANITARY AGENT
OF THE STATE BOARD OF HEALTH OF FLORIDA,
HAVANA, CUBA, ——— ——, 189—.

This is to certify that ——— ———, a native of ———, and a resident of ———, color ———, years of age ———, has produced satisfactory proof to me that —— has had yellow fever, or is acclimated to it by —— years' residence in the island of Cuba or by —— years' residence in cities and towns where it has recently prevailed; that —— is protected from smallpox by successful vaccination or an attack of the disease, and that —— is in good health at the present time. And I further declare my belief that —— is sufficiently acclimated to the diseases of the tropics so that —— presence threatens no danger from yellow fever, cholera, or smallpox.

[The applicant may be required to swear to the truth of the statements if the officer issuing this certificate so desires.]

PERSONAL DESCRIPTION OF BEARER.

[To be used in summer months or when disease is epidemic.]

Height, —— feet —— inches. Weight, —— pounds. Bald, yes, no. Hair, straight, curly; black, white, red, brown, mixed. Mustache, no, yes; white, red, brown, black. Chin beard, yes, no; white, red, brown, black. Side whiskers, yes, no; white, red, brown, black, Size, large, small. Form, full, slender.

[SEAL.] ——— ——— i

Digitized by Google

HEALTH CERTIFICATE.

HAVANA, CUBA, ——— ——, 189—.

This is to certify, that ——— ———, a native of ——— and a resident of ———, color, ———, years of age, ———, sex, ———, has produced satisfactory proof to me that ——— has been in neither Europe, Asia or Africa, or any place where Cholera Asiatica exists for the last ——, and that ——— is in good health at the present time.

———— ————, *M. D.*,
U. S. Sanitary Inspector, M. H. S.

Senator Call.—These certificates are given by you, are they not?

Dr. Burgess.—Yes, sir.

Senator Proctor.—There are three different forms, are there?

Dr. Burgess.—They are different in form, according to where they are going. Florida requires a different form than New York. The one headed "Health Certificate" is simply with reference to cholera. That is a recent one. There are people, for instance, whom New York would receive if they knew they had not been exposed to cholera or were not immigrants, that perhaps would not be received by the State of Florida because they were not acclimated to yellow fever.

Senator Proctor.—Can you tell us whether cholera has ever been transmitted from here to the United States?

Dr. Burgess.—No, sir; I cannot tell that. It has been here. It has not been here, I think, since 1872. Am I right, Mr. Williams?

Mr. Williams.—Yes, I think so. We have had some scares since that, but I think not the disease.

Dr. Burgess.—In southern Europe and around the Mediterranean they had it when it did not get here. It certainly has not been in any part of the island for the last two years.

Senator Proctor.—Has it ever been in the States when it has not been here; that is, to any extent, I mean?

Dr. Burgess.—You mean in the States without getting here?

Senator Proctor.—Yes.

Dr. Burgess.—Well, it was in the United States this last year.

Digitized by Google

Senator Proctor.—I say, to any extent?

Dr. Burgess.—No; I do not think so.

Senator Proctor.—Can you say when it has been both here and in the United States, whether it has oftener been here first?

Dr. Burgess.—My opinion just now is that it has oftener been in the States first.

Senator Squire.—I would like to ask whether in the opinion of Dr. Burgess, there is any reason for the United States to take measures to prevent the introduction of cholera from this port into the United States in case very severe restrictive measures are adopted or continued as to the Northern ports; whether it is likely or probable that immigration into the United States by way of Cuba would go on to such an extent as to render it desirable that the United States should legislate to prevent it, having in mind the repressive measures in the Northern ports?

Dr. Burgess.—I can easily understand, if severe measures were adopted in the Northern ports of the United States against cholera, that this route through here would be tried. Individual instances were tried during this last fall. They openly stated to me that they came here to get to the United States, to avoid detention at New York and other places. These men wanted to get into Florida, New Orleans, etc., but they were unsuccessful. That was checked by the certificate system I have referred to.

Senator Proctor.—If severer restrictions were put on at our Northern ports than here you think it would lead to quite an immigration through this gateway, or an attempt?

Dr. Burgess.—Yes; an attempt undoubtedly would be made if they thought it would be successful.

Senator Proctor.—Under what authority are the regulations here; under the city or the general authority of the island?

Dr. Burgess.—In the first place, there is a superior board of health, as it is called; that is over the whole island. Then there is a provincial board over each province. Then in each town there are local boards of health. There is in Havana a local board.

Senator Call.—Established by authority of the captain-general?

Dr. Burgess.—These different boards of health are

Digitized by Google

nominated by the governor-general, the civil governor and the mayor, respectively.

Senator Call.—What are the conditions of the public health here? Is it a place where epidemic diseases are likely or liable to exist from the natural sanitary conditions which prevail here?

Dr. Burgess.—Very likely from conditions that do prevail here, not from natural conditions. I think Havana ought to be one of the healthiest cities in the world. Under the present conditions I think it is a favorable place for the increase and spread of epidemic diseases.

Senator Call.—With regard to cholera?

Dr. Burgess.—Cholera particularly.

Senator Dubois.—Are these epidemic diseases, including cholera, which you speak of as having occurred here, generated here as a rule, or are they brought here?

Dr. Burgess.—Cholera is never generated here, the legitimate Asiatic cholera.

Senator Dubois.—Is yellow fever, as a rule, generated here?

Dr. Burgess.—It is here and it continues here. At the same time, I think it ought to be stamped out here.

Senator Dubois.—Is it brought here and started here?

Dr. Burgess.—We have it brought here and it starts here. There was a time here when we have no historical evidence that it existed, but that was over a hundred years ago, perhaps. For the last fifty years it has never been away from here.

Senator Dubois.—Of course, you understand that there is a great deal of uneasiness in the United States as to the cholera getting there, on account of it having broken out last year in Europe. Is there any particular uneasiness here, and are you taking any extraordinary measures to prevent it from coming here?

Dr. Burgess.—Well, the measures that are being taken here are mainly of a quarantine character—not letting vessels come in here that have it.

Senator Dubois.—Are they more stringent than your usual quarantine regulations?

Dr. Burgess.—I think they are pretty stringent; I think as good as any quarantine, except in the case of certain privileged lines—for instance, the Spanish mail line. I think when sent to Mariel, thirty miles away, they are

Digitized by Google

probably as good as any quarantine, but when detained in the harbor I should have very little confidence in that measure. By quarantine here I only mean detention. The regular rules, if carried out, leave scarcely anything discretionary with the health officer. For instance, if a vessel comes from the port of Havre, and there has been a case of cholera, I think, in Havre, that would share the same fate as a vessel from Hamburg. And these restrictions vary some according to the activity of the disease there. The quarantine here is from seven to twenty days at Mariel. If they come from simply suspected ports, or ports where cholera seems not to be very active, they sometimes will keep them for three days under observation here in the harbor. There may be one or two vessels out there now. There was one from Antwerp not more than two or three days ago. The main restrictive measures—the main measures—to keep cholera out of the ports of the island of Cuba are about of that character. There is very little else done.

Senator Dubois.—Besides quarantine, you mean?

Dr. Burgess.—Yes, sir.

Senator Dubois.—There are no unusual quarantine measures being talked of now on account of cholera, nothunusual in the methods which are being used to prevent cholera, nothing extreme?

Dr. Burgess.—Nothing in that line being done. There is a great deal being agitated through the newspapers and among sanitarians, but it has not taken any practical form yet.

Senator Squire.—With regard to these certificates I understand that the Government of Spain is requiring from the people, called *cedula;* what do those cover?

Dr. Burgess.—That is to identify the person; covers his birthplace, his residence, his nationality, his occupation, and there is a descriptive list on that *cedula* describing the person, and there is often considerable more of it.

Senator Call.—That has no relation to disease, has it?

Dr. Burgess.—It is a revenue and police measure.

Senator Squire.—I was going to ask if there is no connection whatever between this *cedula* and the business of immigration.

Dr. Burgess.—Not a bit that I can understand.

Digitized by Google

Senator Squire.—Or with reference to sanitary measures?

Dr. Burgess.—No, I think not; it is not of that character.

Senator Proctor.—You speak of the conditions here not being favorable to shutting out cholera. Do you refer to the laxness of the public precautions, or the habits of the people, or to what especially? What are the especial dangerous conditions?

Dr. Burgess.—Well, there are a number. In the first place the sewerage of the city is worse than none at all; and fortunately in one sense, probably not more than one quarter of the city has sewers. I refer to the fact that all of the deposits, water-closet refuse, excrement, etc., remains in holes in the ground within the enclosures of the house, and remains there to ferment. There is another thing; I would say at the present time, the municipal authorities, so far as I can see, are doing very little to keep things clean in the city, to keep the streets clean. You can see that yourselves.

Senator Proctor.—Neither the general nor the municipal authorities are taking the steps that you would think necessary to avoid disease and make the city safe?

Dr. Burgess.—Neither.

Senator Call.—So that the cholera, if brought here, would find conditions peculiarly favorable to it?

Dr. Burgess.—I think so.

Senator Proctor.—The laxness of the authorities would tend to breed individual carelessness; the people would not naturally be more careful than the officials?

Dr. Burgess.—I think the people generally are far ahead of the authorities in that respect. I think the people generally are very much in favor of sanitary improvement. Don't you think so, Mr. Williams?

Mr. Williams.—Yes, sir; they are about all in favor of it; there are a great many expressions of sentiment in that direction.

Senator Proctor.—These suggestions are not carried out?

Dr. Burgess.—No; these suggestions fall to the ground.

Senator Call.—Then you would say that there was

Digitized by Google

very great danger, in case of a severe epidemic of cholera in Europe, of its finding a lodging here?

Dr. Burgess.—I can say that all that would keep it out is what I have stated.

Senator Call.—And its importation from here into Florida and the States; that is what we want to know.

Dr. Burgess.—I am inclined to think if it should get into Havana, unless active restrictive measures were taken, that there would be a good deal of danger of its getting into Florida in particular, and New Orleans, perhaps, and maybe in New York; but far more into Florida.

Senator Call.—If it gets into Florida, of course it goes everywhere. There is a line going direct to New York.

Representative Covert.—Assuming that a bill will be presented to Congress and action taken in this matter, what suggestions have you, if any, as to the precautions that should be adopted, taking the port of Havana as an instance, for the protection of the people of the United States?

Dr. Burgess.—Complete protection would be afforded by a plant of steam and sulphur dioxide fumigation and disinfection at Havana, operated by the United States, and requiring vessels and the baggage of passengers and some cargo to undergo this disinfection before leaving for any port in the United States; and certificates to passengers. Vessels failing to submit to this to be viewed as suspicious and held in quarantine or shut out at port in the United States.

Senator Gibson.—Involved in this inquiry, and especially with reference to cholera, have you any objections to giving your views as to the strength or weakness of the Spanish quarantine at this port?

Dr. Burgess.—I should say it was imperfect. It is strong in one direction. It is strong in the direction of keeping certain vessels away, and as long as we are not going to have cholera here unless it is brought here, that is of importance. I think they are going to be very rigid and severe on certain vessels.

Senator Gibson.—The point is as to the importation of cholera into the United States. As I understand, the likelihood of its introduction depends largely upon the uses which will be made of the Spanish ports in Cuba; hence I propose this last inquiry as to the strength or weakness of the quarantine regulations in Spanish ports. You say they are imperfect?

Digitized by Google

Dr. Burgess.—I say they are imperfect; I think they are irregular and imperfect.

Senator Squire.—You spoke about the Royal Line from Spain being treated more leniently than any other.

Dr. Burgess.—Yes; that is shown frequently by the smallpox coming in here on those steamers.

Senator Squire.—How about sailing vessels?

Dr. Burgess.—Sailing vessels are dealt with pretty rigidly as a rule; they are kept away.

Senator Gibson.—Can you make any statement with reference to the number and the names of the Spanish lines of steamships?

Dr. Burgess.—There is the mail line; there is a line of which Blanch & Co. are consignees. There are two regular lines, anyhow, and then there are French and German steamers which stop at ports in Spain, and there are irregular steamers coming here very often.

Senator Gibson.—How about Italian steamers?

Dr. Burgess.—There are regular trading lines to and from Europe; from Liverpool.

Senator Gibson.—No tramp Italian steamers?

Dr. Burgess.—I do not know of any.

Senator Squire.—Are there steamers that touch at ports in various countries—Austria, Germany and elsewhere?

Dr. Burgess.—There are steamers that do this and have been doing it for the last year, not with great regularity, but doing it, bringing immigrants from Spain and Italy, or rather taking them through here, bringing some here; a certain portion of them would be for Havana and the remainder for Mexico, and these vessels have discharged their passengers at Vera Cruz and gone on to New Orleans.

Senator Squire.—I have been told that Russians get onto these tramp steamers and come through the Mediterranean to the United States.

Dr. Burgess.—I think that is done to some extent.

Senator Gibson.—Do you express any opinion as to whether there should be more caution exercised with reference to quarantine regulations as against Spanish laborers than against ordinary immigrants coming through Spanish ports into the United States.

Dr. Burgess.—Native Spaniards are no more accli-

Digitized by Google

mated to yellow fever than are you gentlemen coming from New York or Wisconsin.

Senator Gibson.—From Cuba?

Dr. Burgess.—If they have been here and can furnish evidence that they have had the yellow fever, then they are acclimated, as we call it, and we let them go.

Senator Gibson.—Would you recommend any stricter quarantine against the Spanish laborers, as a class, than against any other class?

Dr. Burgess.—I would recommend a closer examination of the man. I would recommend closer investigation as regards the proof of being acclimated to the yellow fever.

Senator Call.—Isn't there a large intercourse in fishing smacks between here and the coast of Florida?

Dr. Burgess.—Yes, sir.

Senator Call.—Have you any idea of the number? It is a regular trade, isn't it?

Dr. Burgess.—I should judge, without having any positive definite data, that there are not far from fifty fishing smacks here in this harbor that ply the trade to different ports. Some go to Yucatan and work along there, and some go up the coast; but I should judge that nearly half of them do a large business between this and Florida.

Senator Call.—If cholera were epidemic here would there not be very great danger of the importation of the disease through the fishing smacks?

Dr. Burgess.—It might be so; it might be a dangerous thing. I regard these fishing smacks as dangerous to Florida anyhow, that is if there is cholera here. In the winter there is not much from yellow fever, but there is in summer. They frequently will have a portion of the crew of unacclimated persons. Young fellows will come here from Spain entirely unacclimated; they get them very cheap; the one or two who control the business will take these fresh ones from Spain as a portion of their crews, and I have a good deal of evidence that every now and then then they bury one over on the keys, etc., about Florida, who has died from Yellow Fever.

Senator Call.—That would be equally true of cholera, would it not?

Dr. Burgess.—Yes; I see no reason why it would not be true of cholera. These fishing smacks go out generally

Digitized by Google

simply with a permit to fish, and not a clearance to any particular port, and once out they go where they like.

Senator Call.—I would suggest that it would be very desirable to have some interview with members of the Spanish board of health here. It is an international matter.

Senator Proctor.—I think it would be well, and if it meets the views of the committee we will endeavor to arrange it.

Representative Stump.—A person who is in the incipient stages of cholera, that has not developed, how long would it take to develop it on him?

Dr. Burgess.—From exposure?

Representative Stump.—No. How long would it take the disease to develop upon one who is in the incipient stages?

Dr. Burgess.—You may have cholerine and have it pass away as cholerine, or it may go on and develop into full grown cholera. The time is rather indefinite. A man may run with the diarrhœa and cholerine as it is termed, perhaps two, three or four days, and he may perhaps weather that and it pass off; and then it may, within one, two, three or four or five days, develop into cholera as you term it. I do not think it is possible to answer your question very definitely. However, I should think if a man had cholerine for four or five days or something like that and it did not develop into cholera he would be pretty likely to escape. At the same time I would like to say that perhaps those dejections, if it were true cholerine and premonitory to cholera, might become dangerous to other people, and almost as dangerous perhaps as those from a full-blown case.

Representative Stump.—I speak with reference to its being sufficiently developed to be ascertained by inspection; how long a time would it take?

Dr. Burgess.—You have reference to a bacteriological investigation?

Representative Stump.—No; if he has cholerine you can detect that by inspection?

Dr. Burgess.—I know of no way except by examination by the microscope. I would have an opinion, but not one that I could swear by, because I know of no way, and I do not think there is any way known, of being positive

Digitized by Google

in that condition of cholerine that it is going to be a case of cholera, without the bacteriological proof.

Representative Stump.—Would the detention of the party for six or eight days be sufficient to indicate whether he had or had not cholera or cholerine?

Dr. Burgess.—I think if I had a case of diarrhœa that had kept on six or eight days and had not developed into cholera, I should hardly think it would.

Representative Stump.—Do not medical authorities teach us that five or six days is the period for its development?

Dr. Burgess.—It may be so. As I said before, if a case presumably of cholerine, a case of diarrhœa, should be continued five or six days without developing into anything more, I should believe that that man had not cholera.

Representative Stump.—Then you think that a quarantine of five or six days would be sufficient?

Dr. Burgess.---It certainly would in the absence of diarrhœa.

Representative Stump.---Then why would you detain a person twenty days?

Dr. Burgess.---If you can have the person isolated I see no reason.

Representative Stump.—With a person isolated five or six days, under the observation of a physician, would be amply sufficient, would it not?

Dr. Burgess.—Yes, separate him from all his former environments.

Representative Stump.—If you have a large enough space could you not quarantine a hundred as well as one?

Dr. Burgess.—You could.

Senator Squire.—Suppose that a case of cholera develops during those five or six days; that, of course would complicate the case?

Dr. Burgess.—Yes, sir.

Senator Squire.—Then suppose at a later time there is a further development; this projects itself along; in order to exhaust the subject and make it plain, is it not better to take a greater number of days than five or six days for one individual case?

Dr. Burgess.—Yes, sir.

Representative Stump.—The object of my question was this: I see that you state on your certificate "I further de-

Digitized by Google

clare my belief that he is sufficiently acclimated in the diseases of the tropics so that his presence threatens no danger from yellow fever, cholera or smallpox." What acclamation in the tropics would secure a man from cholera?

Dr. Burgess.—None.

Representative Stump.—Then that certificate should not embrace cholera?

Dr. Burgess.—To be more exact it could have been stated differently. I think cholera is inserted there as a kind of evidence that there is watchfulness for these epidemic diseases; but it is not very well worded I think. You lawyers could make very much better ones, doubtless.

Representative Stump.—I only wanted to arrive at how long a residence in Cuba would be necessary to be a guaranty that the person should not have cholera in the United States?

Dr. Burgess.—Cholera is included among these diseases, but the certificate is used mainly in the matter of yellow fever fom here.

Representative Stump.—Would you not think that if the intended emigrant was quarantined for five or six days at the port of departure, and then inspected daily aboard ship coming over to the United States, on a voyage of, say ten days, and did not develop cholera, would you not think that the United States was secure from that party disseminating it?

Dr. Burgess.—And his baggage fumigated.

Representatiue Stump.—Before he goes aboard ship, and the ship fumigated before he is allowed to go upon the ship.

Dr. Burgess.—If all of that work is thoroughly done all the way through I should think so.

Representative Covert.—Would you leave that to the steamship company on the other side to do and then take much stock in it?

Dr. Burgess.—No, I would not have a great deal of confidence in parties who are interested financially.

Representative Covert.—You would not leave it to the steamship companies?

Dr. Burgess.—No.

Representative Stump.—A United States consul at the port of departure going upon these vessels, and the consul

Digitized by Google

himself inspecting the quarantine every week, he having control over the vessel, and also making his report to the Secretary of the Treasury weekly in regard as to how the quarantine has been carried out; how would that be?

Dr. Burgess.—That is far more secure.

Representative Stump.—And I think that you occupy a position somewhat similar here; that you yourself could guarantee against cholera, under these regulations, going into the United States?

Dr. Burgess.—I should work for it. That is the way I am working now.

Representative Wright.—Would you be willing to quarantine a ship here yourself seven days and then guarantee that no cholera would get into the United States on that ship?

Dr. Burgess.—If they would be willing to give Mr. Williams and me sufficient power in the matter I would be willing to stake my reputation on it.

Senator Squire.—How many consuls are there and how many physicians, taking the consular agents and all the retinue of people in that order of business throughout the world, and in Europe particularly, who would carry out such regulations as efficiently as these two gentlemen? That is the question.

Representative Wright.—Would there not be a natural desire on the part of these consuls to placate the people among whom they are living?

Representative Stump.—I should be very sorry for our country if we had not many Dr. Burgesses.

Representative Wright.—If cholera were epidemic in Havana and a steamer load of emigrants embarked for Key West, how many days' quarantine would you consider necessary for the whole party before you would certify that they might be admitted into said port without any danger of infection to the people there?

Dr. Burgess.—If none of the party were sick or developed suspicious symptoms of cholera seven days after leaving Havana I would give *pratique*, first having thoroughly disinfected the baggage by steam. If anyone did develop suspicious symptoms I would have him and those having communication with the suspected individual in insulation until satisfied one way or the other. The balance of the company showing no suspicious symptoms would be liber-

Digitized by Google

ated after seven days. In other words, the ship then would stand in the same relation to the well passengers as the city of Havana with cholera patients.

OFFICE OF THE CONSUL-GENERAL
OF THE UNITED STATES,
HAVANA, Thursday, December 29, 1892.

Present, Senators Proctor, Dubois, Call, Squire, Gibson; Representatives Stump, Covert, Coburn, Wright.

STATEMENT OF DR. JOSEPH Y. PORTER.

Senator Proctor.—Please give us your residence, your official relations, and the length of time you have been in the service?

Dr. Porter.—I am State Health Officer of Florida, and have been since 1889, in March or April. Before that, since 1885, have been connected with health matters in Florida as president of the county board of health for the county of Monroe.

Senator Proctor.—That is, at Key West?

Dr. Porter.—Yes, sir

Senator Squire.—What else does the county of Monroe include besides Key West?

Dr. Porter.---It includes Tortugas and the Keys up as far as Cape Florida.

Senator Squire.---And some of the mainland?

Dr. Porter.---Very little of it. I do not know as it includes very much now; it used to take in a good deal of the mainland, but the Legislature of 1889, I think it was, divided the county, and the county of Monroe is principally the island of Key West and the adjacent islands up as far as Cape Florida and down to Tortugas.

Senator Proctor.---You were present yesterday and heard the course of inquiry in regard to the danger of infection from this island. Please give any statements in your own way in regard to the danger, the means which have been taken in the past, and the means that should be taken to prevent it.

Dr. Porter.—I believe the question was asked yesterday as to the possibility of cholera getting into the United States through this port, if immigration was shut out from Northern ports. Of course, it can not be contradicted or

Digitized by Google

denied that there is a possibility of this tide of immigration being directed this way, but I do not think there is any very great probability of it.

Senator Squire.---Have we not seen statements published to the effect that intending emigrants coming from Europe to the United States have been vainly seeking opportunity to get into the United States through the ordinary routes of travel to the North, and is it not natural that they should try to get in this way if they thought there was any laxity on the part of the regulations here?

Dr. Porter.---Of course, I could not pretend to say that there would not. I give my opinion that they would not get in. Whether they would seek to get in or not, I would not say.

Senator Squire—You think they could not get in?

Dr. Porter—I do not think they could get in under the present system of regulations.

Senator Squire—You speak with reference to the restrictions about entering Florida?

Dr. Porter—Yes; I am speaking especially with reference to the health department which I represent.

Senator Squire—You do not know how far that might be true of New Orleans?

Dr. Porter.—Only that I know that New Orleans has a system of surveillance and detention, and that detention lasts at least five days from leaving the port of Havana.

Senator Squire.—In the summer?

Dr. Porter.—In the summer; yes, sir.

Senator Proctor.—The yellow fever has been transmitted from here to the mainland, has it not—to Florida?

Dr. Porter.—Yes, sir; in years gone by.

Senator Proctor.—More than once?

Dr. Porter.—Yes, sir; several times. It has not been transmitted to Florida, to my knowledge, since 1887.

Senator Proctor.—Do you think the present regulations here and in Florida are sufficient or the best that could be adopted for prevention?

Dr. Porter.—I think that the regulations that are now in force during the quarantine season, between the 1st of May and the 1st of November—I am speaking more especially now with reference to yellow fever—are the best that could be adopted to prevent the introduction of yellow fever into Florida, and at the same time will interfere as

199093

Digitized by Google

little as possible with the commercial relations between Florida and Cuba.

Senator Proctor—You speak now of the means adopted in Florida especially, do you?

Dr. Porter.—Yes, sir.

Senator Proctor.—You consider this, do you not, a dangerous point, peculiarly liable to contagious disease, cholera and yellow fever?

Dr. Porter.—Yes, sir; yellow fever more especially than cholera, because cholera is not endemic here and yellow fever is.

Senator Proctor.—Do you think all the necessary precautions are used here to prevent the spread of contagious diseases to our ports?

Dr. Porter.—I think that the United States authorities, co-operating with the State authorities through Dr. Burgess, have taken all necessary precautions.

Senator Proctor.—Looking after the possible introduction of disease from this point into Florida?

Dr. Porter.—Yes, sir.

Senator Proctor.—Do I understand you to say that you think everything has been done, is being done, and will be done, if the same system is continued—everything that is possible?

Dr. Porter.—What I mean to say is, that I think the danger of the introduction of yellow fever from this place into Florida, under the present system of surveillance and certificate, is reduced to a minimum. I do not mean to say that it is absolute protection, because I do not think there can be absolute protection without shutting out all communication. Absolute nonintercourse will insure absolute protection, but as long as communication must be kept up—and it will be kept up—I think the present system of certificates and surveillance as exercised, and which is operated by the United States Government through Dr. Burgess, the sanitary inspector here, and the State health authorities, has reduced that risk of the introduction of yellow fever from Havana into Florida to a minimum.

Senator Squire.—What do you say about cholera?

Dr. Porter.—Cholera is not endemic here.

Senator Squire.—Suppose that cholera should get into Havana, as it is thought by many it is likely to do, if it keeps on its way westerly in Europe; how then with regard

Digitized by Google

to the relations between Florida and this city under the present system?

Dr. Porter.—I can answer that question in this way. I will tell you what it was proposed to do by the health authorities of Florida last summer. The understanding with Dr. Burgess was that if any vessel arrived here with cholera on board he would immediately notify the health authorities of Florida, and all communication between Havana and Florida would cease.

Senator Proctor.—What do you say about the communication by these fishing smacks? Is not there danger in these vessels that go out without any clearance to a Florida port?

Dr. Porter.—The regulations in Florida are such that if a vessel comes in there without a consular bill of health from this place she is put into quarantine, and if she has passengers on board that have not the certificate of Dr. Burgess she is placed under quarantine also. A vessel coming into Florida during the quarentine season from Havana that does not conform to the rules and regulations of the Florida State Board of Health in the particulars of not lying over night in the harbor of Havana, not having an unacclimated crew, and several other things that you can see by reference to the maritime regulations of the State Board of Health of Florida, is placed in quarantine. Vessels coming into Florida ports from this port are required to have their crew acclimated to yellow fever, and that acclimation is settled by Dr. Burgess.

Senator Proctor.—I suppose these vessels might meet and fish on the same banks with Florida vessels and the crews mingle?

Dr. Porter.—Yes; that is all possible.

Senator Proctor.—Is there any way to guard against that?

Dr. Porter.—The way to guard against that is by a coast patrol. And I would like to say right here that immediately after the State Board of Health of Florida was organized a request was sent to the Treasury Department, through the Marine-Hospital Service, for this coast patrol, asking to have it, and not only once but two or three times.

Senator Squire.—Has that been granted?

Dr. Porter.—No, sir; except in this way, we have been

Digitized by Google

informed that a revenue cutter has been instructed to cruise up and down the coast.

Senator Proctor.—What is the Florida system of protection from contagious diseases? What is the organization of the board of health with which you are connected?

Dr. Porter.—The organization consists of three citizens of the State appointed by the governor, and they appoint the health officer, who is the secretary and executive officer of the board, and is known as the State Health Officer. They have full power and control over health matters in the State. They have authority to place any and all restrictions they may think necessary upon railway and navigation companies to prevent their bringing in disease or conveying persons with disease. In fact, their authority is very ample.

Senator Proctor.—Have you a copy of the act establishing your board of heath?

Dr. Porter.—I have not with me, but I will furnish the committee with a copy.

Senator Squire.—Allow me to ask if the document I show you contains the regulations of the State Board of Health of Florida for quarantine and maritime medical inspection.

Dr. Porter.—Yes, sir; these are the rules of the State Board.

Senator Squire.—Would it not be well to put these regulations into the record?

Senator Proctor.—We will do so.

Dr. Porter.—I will state with regard to these that there have been one or two additions to the rules since this was printed. I will furnish the committee with a later print.

Senotor Proctor.—The expense of these measures is borne by the State?

Dr. Porter.—Yes.

Senator Proctor.—Is there any specific revenue to meet it; any assessment of the vessels that are inspected?

Dr. Porter.—The custom prevails in Florida, as it does in all other ports of the United States, that vessels pay a certain fee for their inspection, disinfection and fumigation.

Senator Proctor.—Is that sufficient in Florida to defray the expense of the Board?

Dr. Porter.—No, sir; it has not been yet.

Digitized by Google

Senator Proctor.—It is really, to quite an extent, then, a tax upon the State?

Dr. Porter.—Yes, sir. This year I think that the Mullet Key Quarantine Station will about pay its expenses; but at the other points of observation, Charlotte Harbor, Sarasota, Punta Rassa, Manatee, the expense is borne by the State. The other ports in the State, as Pensacola, Fernandina, Apalachicola, Cedar Keys and Key West, have quarantine regulations operated by the County Boards of Health.

Senator Proctor —Do you consider that a good system, with a part of the ports under the control of the county boards and a part under the State board?

Dr. Porter.—No, I do not; and I think this next Legislature will probably alter it.

Senator Proctor.—Is there any uniformity of system between your State and Alabama, Louisiana, Mobile and New Orleans?

Dr. Porter.—The general principle is the same in Louisiana, Texas and Florida, but the details of operating are somewhat different.

Senator Squire.—How about Mobile?

Dr. Porter.—The same is true of Mobile.

Sonator Proctor.—A national quarantine would seem to secure greater uniformity, would it not?

Dr. Porter,—Yes, sir, it would if the Government would do business as other people do business; but there generally is so much circumlocution, so much delay, so much deferring to higher authority, and so little latitude given to the officials on the spot. If that could all be overcome a general system would be of advantage.

Senator Squire.—As I understand you, if cholera existed in Havana there is no way of preventing its communication to the United States unless the present traffic system is entirely shut down?

Dr. Porter.—I do not mean to say that. There could be a system started right here in the harbor of Havana which would be the thing to be desired of all others, if the concession could be had from the Spanish Government, and that is what the sanitarians in Florida have been advocating for a great many years, that this inspection, fumigation and disinfection should be done at the port of departure. If it were possible to get the concession from the Spanish

Digitized by Google

Government allowing the United States Government to operate a plant here of steam disinfection and sulphur dioxide fumigation, that would be the thing of all others to be wished for and would make the system perfect.

Senator Squire.—Without that, then what?

Dr. Porter.—Without that I do not see any other way, if cholera should prevail here in an epidemic form, but to stop all travel.

Senator Squire.—That would be a serious interruption to the business of Key West, would it not?

Dr. Porter.—Yes, sir, it would; and also of Tampa.

Senator Squire.—Do you consider it a feasible thing to get the Spanish authorities to consider that matter? Have you given that matter consideration?

Dr. Porter.—I have had several conversations with Surgeon-General Hamilton on the subject and with other prominent sanitarians of the country, and they seem to think that the Spanish Government would not grant the concession. I do not think it has ever been asked for. But it always has struck me that the place for this inspection and disinfection was at the port of departure; that the passengers should be inspected and their baggage disinfected before they went on board ship, so that the ship might not be infected afterwards.

Senator Squire.—Would that be practicable to an extent sufficiently general with all these different countries?

Dr. Porter.—I do not know how the treaties with the different countries read.

Senator Squire.—It would take some time to negotiate all these arrangements.

Dr. Porter.—Yes, sir; and it would take some time to build quarantine stations all along the coast from Maine to Puget Sound.

Senator Squire.—We have this emergency right on us —within a few months; perhaps two months.

Dr. Porter.—I speak in view of the absence of any protection now, or any protection that you may think is general in its character, and with the difficulties that would arise from delay in providing this protection. It would probably consume a year or two to construct these different stations.

Senator Proctor.—The authority of our consular health officer here, we understand, only extends to issuing cer-

Digitized by Google

tificates to individuals, and would not extend to any means of prevention by fumigation; would not extend over the vessel. Is that correct?

Dr. Porter.—Dr. Burgess can answer that question.

DR. BURGESS—RECALLED.

Senator Proctor.—Dr. Burgess, will you state whether you have the authority I have suggested?

Dr. Burgess.—Absolute authority, no; but it has been often the case that the vessel desired it; they often desire it to present themselves more favorably at the port in the United States to which they are bound.

Senator Proctor. Please state how much absolute authority you do have, and what right by permission?

Dr. Burgess.—The idea is that it amounts to a bill of health; the cleansing of the vessel, fumigation, disinfection of the vessel must be shown on the bill of health.

Senator Proctor.—What real authority have you in that direction? What power have you by law?

Dr. Burgess.—Perhaps no absolute power except on American vessels.

Senator Call. What power have you on American vessels?

Dr. Burgess. When you come to that matter perhaps I could not coerce them; it is only to create a feeling among shippers that the better condition in which they leave here for the United States, the higher hygienic condition, the more favorable they will be received in the United States; in other words, all these things will be taken into consideration by the health authorities in the United States, and many have been very anxious to have that done. I do not know that there is an absolute authority, but the owners know that they would not receive these passengers in Florida unless they had the certificates.

Senator Proctor. That is a matter of self-interest with the transportation companies. Have there been any cases where you have used any means of disinfecting baggage or vessels?

Dr. Burgess. I have done it, formerly did it, particularly on the line to Florida, by request of the owners of the line and of the health board in Florida previous to the establishing by the State Board of the plant of Florida. It

Digitized by Google

has been done frequently on the Ward Line in times gone by.

Senator Proctor. As a matter of consent and agreement between the consular authorities, the transportation line and the Cuban authorities?

Dr. Burgess. The health officers in the port of New York desire that the Spanish line that runs to New York should be notified that if anything of that character should be done, consideration would be made in their behalf on arrival there.

Senator Squire. While the doctor is speaking, would it not be well to draw him out with regard to what further effort he thinks ought to be made to get the Spanish Government to consent to any enforcement of regulations?

Senator Proctor. I would be glad to hear any statement the doctor would like to make in regard to that.

Dr. Burgess. I do not know that I could give any information on that point. I suppose that would have to be done from Washington.

DR. PORTER—RECALLED.

Senator Dubois. I would like to ask Dr. Porter a question. We have received some valuable expert testimony from physicians in New York, and assuming that you are entirely familiar with the present phase of the cholera question, and with the workings and details of quarantine, and the laws both of Cuba and of Florida, in your opinion is there much danger of cholera getting into the United States from this port, taking everything into consideration?

Dr. Porter. Under the present state of affairs I do not think there is.

Senator Dubois. Then you would not, of course, make any suggestions as to extra precautions?

Dr. Porter. I would not go so far as that; I would not say that. A good sanitarian always looks ahead for possibilities that may arise, and I think it would be as well to have some understanding or agrement with the Spanish Government with regard to the possibility of cholera getting in here from Europe, and what should be done in case it did.

Senator Dubois. You think, under present conditions, it could be kept from coming through this port; that if

Digitized by Google

cholera gets into the United States it will come through other ports than this?

Dr. Porter. If it gets into the United States I think it will first come through other ports than this. If it should get into New York I think there is a good deal of probability of its getting down here into Cuba from New York. And it depends altogether upon what part of Europe first becomes infected. If it should prevail to any extent in Spain I think the probability is increased of its getting in here, although I do not remember that when they had it so badly in Spain several years ago there was any cholera introduced here then. Was there, Dr. Burgess?

Dr. Burgess. No; it did not come here.

Senator Dubois. If the United States should pass laws restricting immigration for a year from all ports, excepting American ports, would that change the condition of affairs and make the danger greater of cholera coming in from here, in your judgment?

Dr. Porter. I do not understand.

Senator Dubois. The provisions of one bill before Congress is to restrict immigration for one year, but the American ports are excepted from that; immigrants may come from American ports; this would be one of the ports from which immigrants might come Now, in case the bill is passed as it has been introduced, restricting European immigration and not immigration from Cuba, for instance, would that change the present status? Would there be more danger then of the cholera getting into the United States from this port than at present?

Dr. Porter. No; I do not see that there would be any more danger than at present.

Senator Proctor. If immigration is entirely suspended from European ports, Mr. Dubois wants to know if the danger would not be increased, it not being suspended between European ports and this port; would not the danger of our getting cholera through this port be increased?

Dr. Porter. Oh, yes.

Senator Squire. I will put this question which has been written out and handed me. If Florida allowed passengers or immigrants to enter the State and New York prohibited them, in case of a cholera epidemic what would be the result, and what would the New York quarantine be worth?

Digitized by Google

Dr. Porter. That would depend altogether upon the the construction of the word "immigrant." If an immigrant is supposed to mean any one not a citizen of the United States, then all of this native Cuban population here not naturalized in the United States would come within the term, would it not? And then another thing, "If Florida allowed immigrants to enter the State and New York prohibited them," Florida would not allow European immigrants to enter the State whether New York prohibited them or not.

Senator Proctor. The point is not European immigrants, but immigrants from here to Florida.

Dr. Porter. That is just exactly what I am trying to get at. These natives here that travel back and forth constantly between Key West and Tampa and Havana, where they are not naturalized citizens of the United States, are immigrants.

Senator Call. It does not make any difference whether a passenger is an immigrant or nor in respect to conveying disease, does it?

Dr. Porter. No, sir.

Senator Call. Then the question is, supposing there is a quarantine in one place and not in another, would not a person wishing to enter the United States, no matter whether he is an immigrant or not, go where the quarantine was least stringent?

Dr. Porter. Do I understand you to mean in the case of a cholera epidemic here?

Senator Call. Suppose it was in Austria or Germany, and there is unrestricted immigration from Germany to this port?

Dr. Porter. So long as there was no cholera breaking out here I do not think we would restrict the native emigrants from here, but we would not allow those from Austria to come into Florida.

Senator Call. How could you discriminate?

Dr. Porter. We would discriminate through my friend, Dr. Burgess.

Senator Call. You could not say that an Austrian could not come in and a Cuban might come.

Dr. Porter. You could say that a person from an infected district could not come.

Senator Call. Under what authority?

Digitized by Google

Dr. Porter. We have it in our State Board of Health rules and regulations.

Senator Squire. They would come directly from here, would they not?

Dr. Porter. Directly or indirectly.

Senator Squire. You would have to trace them up.

Dr. Porter. We trace up this question of acclimation to yellow fever just that same way.

Senator Call. Supposing Florida has a law by which you may exclude anybody from coming into Florida from an infected district, or one which you suspect to be infected, and Alabama does not have such a law and New York does not, what then is the value of the Florida restriction?

Dr. Porter. Unless they all act in concert it is of no value; but this question was addressed, I thought, more especially to the Florida matter, and therefore I answered it that way.

Senator Call. A citizen of the United States, of course, has a right to enter irrespective of anything except his liability to introduce disease?

Dr. Porter. Yes; if there is a reasonable doubt about his bringing in disease, can he not be prohibited?

Senator Call. Under your statute you might do it.

Dr. Porter. Yes, under our statute we can do it.

Senator Call. Suppose Mississippi or New York has not any such statute, would you not get the cholera into Florida as well as New York from the inefficiency of the quarantine statutes of other States?

Dr. Porter. I think so.

Senator Call. This committee is anxious to devise some system, if possible, which can harmonize with the commercial interests both of Cuba and Florida and elsewhere.

Representative Stump. Do you know of any sanitary reason why, if cholera exists, say, in one or two ports in Europe, there should be an entire suspension of immigration from the whole continent?

Dr. Porter. Any sanitary reason; no, sir, I do not.

Representative Stump. Would you deem it wise and proper, because cholera existed in Hamburg, to pass an act excluding immigration from all the other ports of Europe?

Dr. Porter. No, sir; so long as it was confined to

Digitized by Google

Hamburg and did not get pretty generally disseminated over the rest of Europe, there would be no reason.

Senator Call. Suppose there was cholera in Cuba, would you advise suspension of all intercourse with Cuba?

Dr. Porter. It depends upon the degree of it.

Senator Call. A virulent epidemic?

Dr. Porter. Yes, sir; if there was a virulent epidemic, I think so, for a stated period.

Senator Call. Until a suspension of the epidemic?

Dr. Porter. Yes, sir; on the same principle that when yellow fever prevails in any State of the United States there is a suspension of all intercourse between the States until the epidemic ceases.

Senator Call. You think that would be the only remedy in such a case as that?

Dr. Porter. Yes, sir.

Senator Call. The New York Board of Trade and Commerce has recommended the restriction of immigration for a year, but the physicians of New York are all of the opinion, notwithstanding they gave way to the idea, that the local quarantine regulations might be made such as to handle it with safety to the people without such suspension.

Dr. Porter. Coming from the board of trade, are there not other reasons besides sanitary ones that that recommendation was made, or is it based entirely upon sanitary reasons?

Senator Call. Entirely upon the apprehension of an epidemic, they say.

Dr. Porter. I could see, if it had come from a convention of sanitarians, that it might be that way, but from a board of trade and commerce there might be other reasons influencing them in requesting the suspension of immigration.

Senator Gibson. I have heard what you have had to say with reference to the quarantine regulations of the Island of Cuba. Have you anything to say on the subject of whether or not there is a greater likelihood of the introduction of cholera into the United States through Spanish laborers other than through the ordinary ports of quarantine?

Dr. Porter. How is that?

Senator Gibson. Spanish laborers from Cuba going to the United States, to Florida ports that are not the sub-

Digitized by Google

ject of quarantine ordinarily, in view of the communication between Cuba and the United States?

Dr. Porter. Well, of course, there is a possibility of this case occurring. I am inclined to think there is not much probability of it. The Spaniards own a great many fishing smacks that work all along our coast, and there would be no laws to prevent them catching our fish. I do not think the attempt has ever been made to introduce the Spanish laborers through that means as yet. We sought to have that corrected by a coast patrol, under an epidemic fund provided by Congress for the prevention of the introduction of contagious diseases into the United States, thinking that the Treasury Department might be justified in putting on a patrol force, but it has not done so. Our State has provided a patrol boat. Of course one small boat cannot provide absolute protection of the whole coast, but it is a menace to evil-doers, and it has had the effect of keeping a great many of them out of our waters in the past few years since we have had the boat running. The State Board owns a little quarantine boat that it operates from the 1st of May to the 1st of November, running up and down the western coast. The eastern coast is not so liable to infection of yellow fever because there is no probability of communication with Havana on that side. The Spanish smacks come along on the west coast, where fish seem to be more plenty. We have run them out whenever we have found them. The revenue cutter has seized one or two for violation of the law, being inside of the limit, but invariably they have got off under a light fine or something of the kind. We have used every argument and means to urge upon the Treasury Department the necessity for a patrol.

Senator Gibson. Could the opportunities of which we have spoken for the introduction of cholera be decreased by any quarantine regulations?

Dr. Porter. I do not think they could.

Senator Gibson. Either National or State?

Dr. Porter. No, sir. I know of no way except through the increase of efficiency of the patrol boat, and it would take a line of revenue cutters more than the Government has to protect this coast perfectly. As I said before, the only perfect protection is in absolute non-intercourse.

Senator Gibson. The only means of safety under

Digitized by Google

these conditions, through the means they have, is the increase in the efficiency of the quarantine regulations here to keep it away from Cuba in order to prevent it from going to our country?

Dr. Porter. Yes, sir.

Senator Gibson. With reference to the coast line of Florida to be guarded in the way of excluding disease, I would like to ask if it is not equal to the entire coast line from New York to Florida?

Dr. Porter. I do not know what the distance is, but I know it is a very long stretch; there are 600 miles on one side and nearly 500 on the other.

Senator Gibson. It is only in reference to the efficiency of the State Board of Health of your State, which is entirely creditable so far as I know.

Representative Stump. From your experience as a medical man, and having charge of the sanitary regulations of the State of Florida in respect to immigration, will you state to this committee what would be the proper practical methods to adopt in view of the threatened invasion of our country by cholera next year?

Dr. Porter. I should say, first, that all immigrants, and for that matter all passengers, coming from cholera-infected ports, or ports where contagious or infectious diseases prevail, should be subject to inspection before being allowed to embark; that their baggage and clothing should be properly disinfected, and that the vessel itself should be properly cleaned, disinfected, and afterwards inspected under oath before some government official, either the consul of the port, or some one designated by the Secretary of the Treasury, under whom all commercial regulations seem to be carried on, and that no immigrant should be allowed to embark who is not in a sound state of health and cannot produce a certificate from competent medical authority that he is well and that his presence in the United States does not threaten the country with any infectious disease. I think, also, that these stations could be established under suitable regulations. In that way the inspection would be at the port of departure and not at the port of arrival, and the requirements of quarantine in this country would be lessened.

*7 sbh 16pp

Digitized by Google

Representative Stump. You would not take away all quarantine even after that?

Dr. Porter. No, I should subject them to another thorough inspection on arrival in this country.

Representative Stump. Do you think that would be sufficient?

Dr. Porter. Yes, sir; I do.

Representative Stump. Would not that be a sufficient safeguard, if properly and efficiently conducted?

Dr. Porter. Yes, sir; I think that is the consensus of opinion among all sanitarians in this country, that the work of inspection, disinfection, cleansing, and matters of that kind should be done at the port of departure rather than at the port of arrival.

Representative Coburn. How long would it take to put that into operation?

Dr. Porter. That I could not tell you. That would depend altogether upon the rapidity with which the officials charged with it acted.

Representative Stump. Have you had occasion to look at the proposed legislation by Congress.

Dr. Porter. Yes; I have seen in the daily press, and seen in other ways the proposed measures. I think that the bill introduced by you covers the points that I have just enumerated.

Representative Stump. You would recommend, then, the adoption of that legislation?

Dr. Porter. Yes, sir.

Representative Stump. Would it be necessary, then, if these regulations were carried out, to have immigration suspended at all?

Dr. Porter. No, sir; except under the provisions of that bill. That bill provides that the President may, in his discretion, in certain emergencies issue his proclamation suspending it.

Representative Stump. But that would be a last resort?

Dr. Porter. Yes, sir.

Representative Stump. The bill you have spoken of is what?

Dr. Porter. House bill 9980.

Representative Stump. As amended in ink?

Dr. Porter. Yes, sir.

Digitized by Google

Senator Proctor. With unrestricted travel and emigration between European ports and this port is there not the same reason, so far as the protection of our United States ports is concerned, that the same measures of precaution should be adopted here as at the port of departure for the United States that would be required at European ports?

Dr. Porter. Certainly.

Representative Stump. I wish to ask Dr. Burgess a question. Please state whether you have read House bill 9980 and heard the testimony of Dr. Porter in regard to it, and what are your views with regard to the efficiency of its provisions?

Dr. Burgess. It looks to me, upon running it over hastily, to be very comprehensive and to the point. I do not know whether there are any points that could be objected to or not without more careful examination.

Represensative Stump. Will you examine it carefully and then give us your opinion?

Dr. Burgess. I will do so. I think it is in line with our present system, is it not, Dr. Porter?

Dr. Porter. I say that the requirements of that bill are precisely what we require in the State of Florida in regard to travel from our State from here, and which is operated by Dr. Burgess, leaving out the disinfection and fumigation of vessels and baggage of passengers, which I have always recommended, as you may know, Dr. Burgess. We have talked the matter over, and we have always agreed that this was the place where all that should be done.

Dr. Burgess. Yes; the port of departure is the place to begin the fight anyhow.

Representative. Stump. Then you believe that the provisions of this bill are sufficient, and if carried out would be as efficient a safeguard, so far as immigration to the United States is concerned, as could be established to protect us from cholera?

Dr. Burgess. (After a careful reading of the bill.) We have been hitherto working here in the direction indicated in the bill. It seems to be comprehensive, and I am of the opinion that it is a good measure to be instituted.

Digitized by Google

OFFICE OF UNITED STATES CONSUL AT HAVANA,
Friday, December 30, 1892.

Present: Senators Proctor, Dubois, Call, Squire, Gibson; Representatives Stump, Covert, Coburn, Wright.

STATEMENT OF DR. MANUEL JOHNSON, MEMBER OF THE SUPERIOR BOARD OF HEALTH OF CUBA.

Dr. Johnson. If you will ask of us such questions as you desire us to answer we will be pleased to give you any information in our power.

Senator Proctor. We wish to learn what would be the probable measures taken here, in case cholera should break out in European ports, to prevent its coming here, fearing, of course, if it gets here it may come to our shores.

Dr. Johnson. I am able to answer you because last summer there was cholera in European ports, and I will tell you what we have done. You must remember that the immigrants to this country from the north of Europe are all rich and not such as come to the United States from those countries. The immigrants to this island are from Spain, not from Germany, not from England, not from French ports. All French, German and English people who come here are rich. If the cholera was in the north part of Europe all steamers arriving here from France, Germany, or England would be quarantined seven days at Mariel, which is about 25 miles from Havana. If at the end of that time no case has broken out the steamer is brought here and fumigated. A steamer from one of these ports in the north of Europe, if she has touched at a Spanish port and been quarantined there, will be held under observation here three days in our port. Our Board of Health is not so well supplied with money as those in richer countries and our methods are not so good as those of richer countries, and therefore we are much more afraid of the disease than you are, who are from a rich country which has better facilities for keeping out the disease.

Senator Proctor. Of course with the progress in medical science and the increased knowledge of proper methods of prevention, it is probable that you would adopt all the best means of keeping out cholera or any infectious disease, is it not?

Digitized by Google

Dr. Johnson. The disposition of the Board of Health is always to keep diseases of all kinds from the country, and our efforts are constant in that direction.

Senator Proctor. Can you tell us whether any measures, and if so what, have been taken in the past, and would probably be taken, at the Spanish ports of departure, if the cholera should break out in Europe, to prevent its dissemination?

Dr. Johnson. When a steamer sails from a port in the north of Europe and touches at a Spanish port, and then comes here, I know that she has been quarantined three, five, six or seven days or more in Spain, and I am not afraid of such a steamer; but if they have the disease in Spain and a steamer comes from a Spanish port to Havana, I am afraid that our methods here are not sufficient to protect us. If the cholera is in Cadiz, or Barcelona, or any Spanish port, a vessel sailing from there will perhaps have a dirty bill of health, informing the authorities at the port of entry of the existence of cholera. In theory the same law applies to foreign as to Spanish steamers; they should be fumigated and quarantined; but if the cholera is in a Spanish port I suppose the authorities there are a little more strict with foreign steamers than with Spanish steamers. I remember that when the cholera was in the south of Spain six years ago, in Cadiz, not all steamers from those points were stopped here seven days.

Senator Call. Do you mean that they were allowed to come in here without quarantine?

Dr. Johnson. Oh, no; some were stopped here three days or more. If there is a case in the steamer the seven days or more are required. If a vessel comes here with the cholera from Spain, or foreign port, the regulations require her to be quarantined seven days, and if no case occurs on the vessel during those seven days, she is then released from quarantine. If, during those seven days, a case breaks out, seven days more are added, and if again a case breaks out, seven days more, so a vessel might be here several months in that way.

Senator Proctor. Does this apply to all vessels from Spanish ports?

Dr. Johnson. To vessels from all the ports of Spain and to those of all nations.

Digitized by Google

Senator Proctor. How many quarantine stations are there in Spain?

Dr. Johnson. There are only two ports in Spain where there are quarantine stations—Mahon and Vigo. If a vessel goes from here with a dirty bill of health to Barcelona she is not admitted there, but she will be sent to Mahon, which is the quarantine port for the Mediterranean. Vigo is the Station for Atlantic ports.

Senator Proctor. In case cholera should come here on board a vessel, whether you have any place where the passengers could be disembarked and held?

Dr. Johnson. Yes; at Mariel, twenty or thirty miles from here, we have a hospital station at quarantine. If a steamer arrives at a Cuban port with cholera on board she will go to Mariel and stop there seven days from the last day a person is sick on board; that is the law. The place of Mariel is convenient, and I think passengers would land and be taken care of, not so well as at the Hoffman House in New York, but they can be cared for. Now, I suppose that if a steamer should arrive here with cholera on board the popular clamor would be so high that the steamer would be obliged to go out without landing any passengers.

Senator Call. I would like to ask the opinion of these gentlemen as to the probability of the importation of cholera into Cuba this year?

Dr. Johnson. I do not think it will come. The importation into Cuba of the cholera from European ports except Spain is very difficult. The passage is long, fifteen to twenty or thirty days from European to Cuban ports and the immigration is confined to the rich classes. There are no immigrants here from the north of Europe; they are all travelers. But if the cholera should appear in Spain it would be different.

Senator Squire. A question we have asked of all the other witnesses, and on which we would like your opinion, is this. Supposing that the regulations at the Northern ports of the United States are so severe that immigrants do not get in there, and they are anxious to get away from European ports, and they come by way of Havana, notwithstanding the voyage is long, to get into the United States this way on account of less stringent regulations, would it not be necessary to stop up this gap?

Dr. Johnson. I do not believe it. It is a very long

Digitized by Google

way and the Spanish Government is very severe with steamers from infested countries.

Senator Proctor. Are there any other Cuban ports where steamers come in except Havana; are there any other ports where disease might be brought in from Europe?

Dr. Johnson. No; steamers foreign to both America and Cuba which come to this island come to Havana, and then to the other ports, except, I believe, there is one French line of steamers which stop at St. Thomas and then at Santiago. The foreign commerce of the other ports than Havana is with the United States.

Consul-General Williams. Yes; I had occasion to make a report on the subject, and I stated that 100 per cent. of the exports of the island, outside of those from Havana, go to the United States. The other ports have no trade at all with Europe.

Senator Proctor. Has cholera ever been epidemic in Havana?

Dr. Johnson. Yes; I believe in 1865, the last time after it was in the States in 1853 or 1854. You sent it to us twice, I think; once in 1833, I believe.

Senator Squire. Do you think there is more chance of your getting it from the United States than of their getting it from you?

Dr. Johnson. Yes; I think it more easily done.

Senator Call. Was the epidemic severe when it was here before?

Dr. Johnson. It was severe.

Senator Proctor. Was the per cent. of mortality greater or less than elsewhere?

Dr. Johnson. We are not very strong in statistics which would enable us to answer that question.

I wish to say that we hope your visit here has been agreeable and that it will be profitable to the two countries. The Superior Board of Health, of which we are members, is not executive, only advisory. We ask always for stringent regulations to protect our island from disease, but are not always able to secure them.

Digitized by Google

OFFICE OF THE COLLECTOR OF CUSTOMS,
Key West, Fla., December 31, 1892.

Present: Senators Proctor (chairman), Dubois, Call, Squire, Gibson; Representatives Stump, Covert, Coburn, Wright.

Senator Proctor. Senator Call, will you preside; you are better acquainted here than I am?

Senator Call. Will you not take the chair Mr. Stump?

Representative Stump. No, sir; I prefer that you should.

Senator Call took the chair and said:

Gentlemen, you will understand that this committee is charged with an inquiry into the subject of immigration, and especially with reference to epidemic and contagious diseases. We wish to gain information as to the character of the intercourse between the island of Cuba and the ports of Florida, and as to the danger of importation of epidemic diseases, particularly cholera. We wish to know how a restriction of immigration would affect the business of manufacturing here at Key West and the interests of this place. If there is any gentleman here who wishes to be heard he will have an opportunity. This committee is here for the purpose of enabling the interests of Key West and of Florida to be considered in the legislation which Congress proposes to enact. There are various propositions; one for the absolute prohibition of all intercourse in view of the apprehended epidemic of cholera next year. Then there is a proposition embraced in a bill which Mr. Chairman Stump has proposed, to restrict and limit it, subject to quarantine regulations, with authority in the President to suspend all intercourse between this country and foreign countries where there is danger of cholera. Now, we suppose that it would probably injuriously affect the interests of Key West to have a total suspension of intercourse between this island and Cuba, the cigar interests being largely dependent upon that. The committee would be glad to hear from any of the gentlemen present in reference to this proposition.

Representative Covert. I suggest that the mayor be heard as representing the municipality of Key West.

Senator Call.—We would be glad to hear him.

Digitized by Google

STATEMENT OF DR. R. J. PERRY, MAYOR OF KEY WEST, FLA.

Mayor Perry. Mr. Chairman, and gentlemen of the committee: There is no doubt in the world that if the inhibition of immigration was made positive and absolute so far as Cuba is concerned the manufacturing interests of this place would be very materially affected. Whether it can be safely said that the interests of Key West in that respect should be protected in the event of Havana becoming infected with cholera to the extent of allowing Cubans to come over here is a doubtful question. I should doubt the propriety of it, however much such inhibition might affect the manufacturing interests of Key West. I believe that the safer course to pursue is to vest the power in the President under certain circumstances to declare absolute quarantine if he and his advisers think best to do so. I believe that the matter can be safely intrusted, so far as Key West and Florida are concerned, to the State Board of Health, of which Dr. Porter is the worthy official. We place upon them, of course, the responsibility of protecting us from contagious diseases, cholera and yellow fever, and if we place upon them that responsibility they certainly should be invested with power to meet it. I know that all of them are absolutely conscientious and painstaking in their efforts to suppress anything that has an appearance of contagious disease, as has been thoroughly evinced in their course heretofore. And whlie I say there is no doubt but that the manufacturing interests here would be seriously affected if a quarantine is placed against Cuba, I am satisfied that it can be more safely intrusted to the State Board of Health of Florida than with any other persons, with, of course, the proviso that if the President should at any time decide with his advisers that it was safer or better generally for the interests of the country to prohibit all immigration, then it should be done. There is no doubt if the contiguous ports become affected that our only safety lies in absolute prohibition of all immigration.

Representative Stump. Does your State Board of Health have its office at the State capital?

Mayor Perry. No, sir; they are located in different portions of the State, watching out for different interests. Their headquarters, I believe, is generally considered to be

Digitized by Google

at Jacksonville. Dr. Porter is traveling over the State from time to time and is very active and energetic in that line. I believe that, so far as the sanitary interests of the General Government and the local interests here are concerned they are entirely safe in the hands of the State Board of Health.

Senator Call. You are a physician, I believe?

Mayor Perry. I was educated as a physician, but I have not been in practice for a long time.

Senator Call. What is your idea as to the danger of the importation of cholera from Cuba and the West Indies?

Mayor Perry. I do not think there is any doubt but what it would be introduced here if it prevailed in those ports. I doubt whether we could keep it out entirely without absolute suspension of immigration.

Senator Call. Do you remember the last time cholera was in Cuba?

Mayor Perry. I do not remember. There has been no cholera in Cuba since I have resided in Key West, some twenty-five years, I think.

Senator Call. Was not the cholera there in 1865?

Mayor Perry. I think not. There may have been a few sporadic cases, but no epidemic, I think.

STATEMENT OF DR. R. D. MURRAY.

Senator Call. You are a surgeon in the Marine-Hospital Service, are you?

Dr. Murray. I am.

Senator Call. Have you been here many years?

Dr. Murray. Yes, sir; thirteen out of twenty.

Senator Call. Will you state to the committee your views in regard to the danger of the importation of cholera to Key West from Europe or anywhere else?

Dr. Murray. We are in no danger from Europe at all, because practically we have no communication with Europe direct.

Senator Call. Are there no vessels engaged in carrying phosphates from here to Europe?

Dr. Murray. They do not come from Europe directly here.

Senator Call. Where do they come from?

Dr. Murray. From South America and the West

Digitized by Google

Indies. Having taken cargoes down there they come here on the way back.

Senator Call. What is your idea as to the danger of the importation of cholera here from any source—Cuba or anywhere else?

Dr. Murray. I cannot say candidly that we are in any danger at all. If there was cholera in Cuba the Board of Health here in this State would do something. Cuba is the only point of danger.

Senator Call. What do you think of the danger of their having cholera in Cuba?

Dr. Murray. I do not know what they are doing over there to prevent it.

Senator Call. If it should be epidemic in the old country, as it was last year, do you think there would be danger of its getting into Cuba?

Dr. Murray. I think so.

Senator Call. What about the communication between this place and Cuba? Is it frequent?

Dr. Murray. We have steamers four times a week in winter and three in summer. Besides that schooners go. I have had some experience in quarantine matters, and I cannot see how we are in danger from Cuba with the restrictions which have heretofore existed, with the regulations which have prevailed for the last three or four years.

Senator Call. That is to say, you think the present system of the board of health in Florida is adequate to protect this portion of the country?

Dr. Murray. I do not say that the system is sufficient, but I think it is sufficient for our safety; in fact, I know it is.

Senator Call. Then you have no suggestions to make with reference to any additional precautions?

Dr. Murray. I have studied the subject considerably, first and last, for nineteen years, and I think that as we are going now we will be in safety, particularly as regards cholera. You understand that Florida has an agent in Havana who is on the constant lookout.

Senator Call. The Marine Hospital Service has.

Dr. Murray. The State Board of Health of Florida has the same man, Dr. Burgess. He is agent of the State Board of Health and agent of the Marine Hospital Service. He is on the lookout there persistently.

Digitized by Google

Senator Call. Does the State of Florida pay him anything?

Dr. Murray. No, sir; but to increase his authority he was made agent of the State board.

Senator Squire. There is a good deal depending upon one man there.

Dr. Murray. One man is all we want.

Senator Dubois. You think there would be no danger if the cholera broke out in Cuba?

Dr. Murray. Well, if it appeared there today Cuba would be a distant land tonight. If there had been a case of cholera last night in Cuba you gentlemen would not have been here tonight.

Senator Call. Suppose there should be cholera in Cuba, and Mississippi, Louisiana and Texas have different quarantine laws from Florida, what then?

Dr. Murray. Then I would abolish the whole business and start new.

Senator Call. What would be the result if you didn't abolish the whole business?

Dr. Murray. We are running under State rights now, and each State looks out for itself.

Senator Call. Suppose each State did not?

Dr. Murray. That would be bad for the other States as well as for the States that failed.

Senator Call. That is to say, a local quarantine would be inefficient if neighboring States had not the same laws?

Dr. Murray. Always. Quarantine should be put under the control of the collector of customs.

Senator Call. Do you mean that the question whether a vessel should be stopped or not should be decided by the collector of customs?

Dr. Murray. The right of a vessel to trade should be at the disposition of the collector of customs.

Senator Squire. Do you mean by that that you would not be in favor of any regulations to be enforced by the general authority or by the Secretary of the Treasury?

Dr. Murray. Yes; by the collector of customs.

Senator Squire. Do you mean that the individual collector at a particular port should be the only judge?

Dr. Murray. No; it should be under the direction of the Secretary of the Treasury.

Senator Squire. Would you not be in favor of a gen-

Digitized by Google

eral system for the United States rather than to have separate systems that might differ widely?

Dr. Murray. I have been in favor of it for nineteen years, and wrote the first paper that ever appeared in support of it. I have served in quarantine eight summers and five winters.

Senator Squire. You spoke so strongly of the protection by your State board that I wanted to bring out your idea on this point.

Dr. Murray. I spoke of our regulations here and the facility with which new regulations would be enforced and put in operation. It would only take about an hour.

Representative Stump. I understand that a good and efficient quarantine at Havana would afford you all the protection you need.

Dr Murray. I think so.

Representative Stump. That is, at the port of departure?

Dr. Murray. Yes, sir.

Representative Stump. Would not that afford, in your judgment, looking at it generally, an ample safeguard with regard to European immigration?

Dr. Murray. I speak of Key West only.

Representative Stump. Why would it apply only to Key West? Would it not be equally true of European ports?

Dr. Murray. If you use the same precautions in other ports as are used by us in Havana the country would be safe.

Representative Stump. Would not that reduce the danger to a minimum?

Dr. Murray. I think so. I know it would.

Representative Stump. Without any suspension of immigration at all?

Dr. Murray. Certainly.

Senator Squire. That is one of the points this committee has had under consideration, whether to favor a law suspending immigration for the period of one year, or to report a bill not so stringent.

Dr. Murray. I think you had better make it safe.

Senator Squire. Is there any way to make it safe without stopping immigration? You say that if there had been cholera in Havana yesterday we would not have been

Digitized by Google

here tonight. You mean by that that we would not have got in here at all?

Dr. Murray. I do mean that; we understand it so.

Senator Squire. The question is, whether it is best to have a general law enacted at this session of Congress.

Dr. Murray. Candidly, I believe that if you wash the clothes and wash the people well before they come, you may bring people safely in the steerage, in the second cabin, or in the first cabin. I know they tried that at Hamburg and did not succeed. If their clothing is not washed they should not be allowed to come. People do not bring cholera in their persons; they bring it in their luggage. I do not know that the cholera has ever come in a person across the Atlantic; I very much doubt if it has. Cholera comes with well people, and soon after they get here trouble commences; that has been the history over and over again. They are not washed on the other side; their clothing is not washed on the other side, as it should be. Our Florida Board of Health have sought for six years to have the Cubans come here clean, bag and baggage, and for five years this town has been free from any danger from Cuba.

Digitized by Google

DETAILS OF ARREST FOR DISSEMINATION OF RUMOR OF YELLOW FEVER.

From the Port Tampa Mail.]

Few appear to be aware that there is a law on the Statute books of this State forbidding the dissemination of false rumors or statements concerning any infectious disease; there is one party however, at least, who is now aware of the existence of the law; he is Mr. J. H. Robinson. We don't know how the rumor got started, but there certainly was a rumor that fever had broken out in Port Tampa, the early part of this week; of course there was nothing in it, as there has been no yellow fever nearer than Havana this year, except the cases on board the "Eva Douglas," out in the Gulf forty miles away. But a clerk working in one of our business houses somehow became frightened Sunday morning, demanded the money due him, obtained it and skipped by the first train. The employer was naturally worried and walked out on the street; met a couple of men coming from the wharf, one of whom was Mr. Robinson. They stopped him and made some inquiries in regard to the residence of a gentleman that they wished to see, and the merchant gave them what information he possessed; then, the fright of his clerk being on his mind, asked these men if they had heard any rumors of the existence of fever in this town; the men said they had not, as they had just landed at Picnic Island. This closed the conversation.

The question he had been asked so worked on Mr. Robinson's mind that by the time he had reached the residence of Mr. Starling, the gentleman he was in search of, he was convinced that a first-class epidemic was raging here. He informed Mr. Starling and several other parties, who

Digitized by Google

were present at that gentleman's house, that "two sea captains had died on the wharf, and the disease was supposed to be yellow fever," and to one of the parties he stated without reservation, that "two sea captains had died of yellow fever, and he was going to get out before the town was quarantined." Of course his statements caused consternation among his hearers, until investigation revealed the falsity of the whole story. Mr. Robinson, however, departed for St. Petersburg as fast as a good boat and a fair wind could carry him. The authorities, however, determined to put a stop to these idle rumors which are constantly causing incalculable trouble and damage to so many towns in South Florida. Tuesday morning Deputy Sheriff Gregory took the "Kissimmee" for St. Petersburg, with a warrant in his pocket for the arrest of Mr. Robinson. Robinson was tried before Judge Miranda Tuesday afternoon and held in a $500 bond to appear before the Hillsborough county grand jury at the next session of the Circuit Court. It is to be hoped that this action will check the circulation of these damaging stories.

Digitized by Google

MULLET KEY QUARANTINE STATION.

(Summary of Work from May 1st to November 15, 1892.):

MONTHS.	Steamers.	Sail.	Total	No. Disinfected	Tonnage.	No. Crew.	No. Passengers.	Pieces of Baggage Disinfected	Amount of Fees.
May	23	23	46	15	18,959	872	423	218	$ 693 50
June	25	13	38	12	19,754	875	437	106	500 00
July	20	12	32	12	17,597	784	445	114	430 00
August	22	13	35	14	21,276	814	495	190	760 00
September	23	13	36	13	23,759	940	343	175	666 00
October	23	12	35	15	26,465	899	340	234	788 00
November	12	6	18	5	12,782	449	201	44	225 00
Total	148	92	240	86	140,592	5,633	2,684	1,081	4,062 50
In 1891	145	70	215	76	110,043	5,278	2,620	750	3 092 50
An Increase of	3	22	25	10	30,549	355	64	331	970 00

Of the above, 15 vessels with 14,549 tons went to Charlotte Harbor, the remainder to ports on Tampa Bay, principally Port Tampa.

*8 sbh 16pp

Digitized by Google

COUNTIES THAT REPORTED DURING THE YEAR 1892.

	January.	February.	March.	April.	May.	June.	July.	August.	September.	October.	November.	December.	Total.
Alachua	1	1	1	1	1	1	1	1	1	1	1	1	12
Bradford	..	..	..	..	..	..	..	..	1	1	1	1	4
Brevard	..	..	..	..	..	..	..	..	..	..	1	1	2
Columbia	..	..	..	..	1	1	1	1	1	1	1	1	8
Dade	1	1	1	1	1	1	1	..	1	1	1	1	11
De Soto	1	1	1	1	1	1	1	1	1	1	1	1	12
Duval	1	1	1	1	1	1	1	1	1	1	..	1	11
Escambia	1	1	1	1	1	1	1	1	1	1	1	1	12
Franklin	1	1	1	1	1	1	1	1	1	1	1	1	12
Hamilton	..	..	..	..	..	..	..	..	1	1	1	1	4
Hillsboro	1	1	1	1	1	1	1	1	1	1	1	1	12
Jefferson	..	..	..	..	..	..	..	1	1	1	1	1	6
Lake	1	1	1	..	..	..	..	1	1	1	1	1	9
Leon	1	1	1	..	..	..	..	..	1	1	1	1	8
Levy	..	..	..	..	..	..	..	1	1	1	1	1	6
Manatee	1	1	1	1	1	1	1	1	1	1	1	1	12
Marion	1	1	1	1	1	1	1	1	1	1	1	1	12
Monroe	1	1	1	1	1	1	1	1	1	1	1	1	12
Nassau	1	1	1	1	1	1	1	1	1	1	1	1	12
Orange	1	1	1	1	1	1	1	1	1	1	1	1	12
Osceola	1	1	1	1	1	1	1	1	1	1	1	1	12
Polk	1	1	1	1	1	1	1	1	1	1	1	1	12
Putnam	1	1	1	1	1	1	1	1	1	1	1	1	12
St. Johns	1	1	1	1	1	1	1	1	1	1	1	1	12
Santa Rosa	1	1	1	1	1	1	1	1	1	1	1	1	12
Suwannee	..	..	..	..	..	..	..	..	..	..	1	1	3
Taylor	1	1	1	1	1	1	1	1	1	1	1	1	12
Volusia	1	1	1	1	1	1	1	1	1	1	1	1	12
Jacksonville, City of	1	1	1	1	1	1	1	1	1	1	1	1	12
Pensacola, City of	1	1	1	1	1	1	1	1	1	1	1	1	12
Totals	23	23	23	21	22	22	25	25	28	29	29	30	..

DISEASES CAUSING HEAVIEST MORTALITY IN 1892, CLASSIFIED BY MONTHS.

	January.	February.	March.	April.	May.	June.	July.	August.	September.	October.	November.	December.	Whole Year.
Consumption	30	30	34	19	30	13	15	16	16	33	26	35	303
Fever (Malarial)	1	1	2	5	4	6	23	29	30	39	27	5	172
Pneumonia	25	28	22	15	18	4	1	7	2	9	11	14	156
Fever (Typhoid)	3	9	7	16	12	16	12	23	9	12	4	10	133
Heart Disease	15	3	15	5	10	11	6	9	8	16	16	16	130
Diarrhœa	7	1	5	8	14	19	22	15	12	9	4	8	124
Cholera Infantum	..	..	4	5	18	28	25	17	8	4	5	5	119
Meningitis	4	6	1	7	8	9	12	8	6	4	5	5	75
Marasmus	..	5	3	2	7	11	10	7	4	8	3	4	64

*9 sbh 8pp

Digitized by Google

DEATH RATES.

	1891	1892.
January	16.19	16.65
February	13.02	12.41
March	12.36	14.91
April	13.22	14.35
May	11.75	18.51
June	12.64	15.22
July	16.24	13.75
August	13 33	14.27
September	12.37	10.39
October	12 66	13.41
November	14.23	11.40
December	11.58	11.03
The whole year	13.22	13.86

AGES OF DECEDENTS, YEAR 1892.

	White.		Colored.		Total.
	M	F	M	F	
Under 1 year	269	240	181	191	881
Between 1 and 5 years	107	85	106	96	394
" 5 " 10 "	26	19	17	21	83
" 10 " 15 "	17	11	13	12	53
" 15 " 20 "	23	29	33	47	132
" 20 " 25 "	42	34	47	36	159
" 25 " 30 "	66	39	46	40	191
" 30 " 40 "	122	83	75	66	346
" 40 " 50 "	77	60	59	54	250
" 50 " 60 "	77	35	45	36	193
" 60 " 70 "	84	65	54	32	235
" 70 " 80 "	72	45	32	30	179
" 80 " 90 "	27	27	13	14	81
" 90 " 100 "	3	2	3	2	10
Over 100 years	1	.....	.....	2	3
Not stated	11	12	12	16	51
Total	1,024	786	736	695	3,241

Average age of decedents—29 62 years.

SUMMARY, 1892

DEATHS.

	Males.	Females.	Total.
White	1,024	786	1,810
Colored	736	695	1,431
Total	1,760	1,481	3,241

BIRTHS—WHITE

Legitimate	1,349	1,133	2,482
Illegitimate	11	17	28
Total	1,360	1,150	2,510

BIRTHS—COLORED.

Legitimate	660	638	1,298
Illegitimate	5	44	95
Total	711	682	1,393

Digitized by Google

Digitized by Google

DISEASES.	Alachua.	Bradford.	Brevard.	Columbia.	Dade.	De Soto.	Duval.	Escambia.	Franklin.	Hamilton.	Hillsboro.	Jefferson.	Lake.	Leon.	Levy.	Manatee	Marion.	Monroe.	Nassau.	Orange.	Osceola.	Polk.	Putnam.	St. Johns.	Santa Rosa.	Suwannee.	Taylor.	Volusia.	Jacksonville.	Pensacola.	Total.
Abortion																															2
Abscess (Abdominal)							1											1											1		1
" (Bowels)																															1
" (Cerebral)						1			1									2	1	1									2	1	6
" (Liver)																		2					1						1		8
" (Lungs)																		1													2
" (Pelvic)																								1							1
" (Renal)																															1
" (Not stated)								1												1											2
Accident (Not stated)						1	1			2							1								1				1		6
Adentitis																		1													1
Addison's Disease																															1
Alcoholism								1			1							1		1									5		9
Anæmia																		1					1								3
Aneurism								1																					1		4
Angina Pectoris							1											1											1		5
Apoplexy					2						3			1				11		3	1			1	2			2	3	1	30
Ascites																															1
Asphyxia								1			1							3				4							1		11
Asthma											1							1	1	1		2									6
Bladder (Disease of)																	1														1
Blood Poisoning							1											1				1									5
Bowels (Congestion of)				2			1		1			2	1									1	1	1	2	1			2	1	23
" (Inflammation of)							1	1			1						1		2						2				2	1	17
" (Consumption of)																													1		1
" (Obstruction of)								1																							1
Bright's Disease							1	1			1	1					1	3	1					5					13	2	37
Bronchitis							1	2	3		2		1		1			11		1		1	1	4	2				14	13	57
Burns								1								1	3	2	1			1	2						3	2	17
Cancer (Breast)				1																									1		3
" (Eye)																															1
" (Face)																							1								2
" (Liver)																	1														2
" (Œsophagus)																															1

Digitized by Google

" (Pancreas)	..		..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	..	..	..	..	1
" (Stomach)	..		..	..	..	..	..	..	..	..	1	..	..	..	..	..	..	..	1	1	..	1	..	..	..	..	..	..	..	..	..	1	..	2	..	..	..	7
" (Testicles)	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1
" (Tonsils)	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..	..	1
" (Uterine)	..	..	..	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	2	..	..	..	..	4	..	5	..	..	..	12
" (Not stated)	..	..	..	..	..	..	..	1	..	..	2	..	1	..	..	..	..	..	..	..	..	..	..	..	..	1	..	..	..	..	4	..	..	..	..	..	9
Carbuncle	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	..	..	..	..	1
Carditis	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1
Catarrh	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	1	..	..	..	..	1	..	1	..	..	..	..	..	..	..	1	..	..	4
Cerebral concussion	..	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..	..	..	1	..	..	..	..	..	3
" congestion	3	..	..	2	..	..	..	..	..	..	3	5	..	..	2	..	4	1	1	..	..	3	2	..	..	1	..	3	..	10	..	5	..	..	..	..	45
" embolism	..	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	..	..	..	..	..	..	..	2
" hyperæmia	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1
" meningitis	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	1	..	..	..	..	..	..	2
" softening	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	..	..	1	..	..	..	..	..	..	..	1	4	1	..	..	..	..	..	8
Chicken pox	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	..	..	..	..	..	1
Child-birth	4	..	..	..	3	3	1	..	..	..	..	..	2	..	..	2	1	4	..	..	2	..	..	..	..	..	..	..	1	..	..	..	..	..	..	..	23
Chlorosis	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1
Cholera infantum	4	..	..	1	2	2	1	5	3	..	5	..	..	..	..	..	2	38	3	4	3	2	1	7	..	..	..	3	25	..	9	..	..	..	..	..	120
" morbus	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..	..	1	..	..	..	..	..	..	2
Colic	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..	3
Congestion	1	..	..	..	1	..	1	1	..	..	8	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..	..	..	1	..	..	..	..	..	..	14
" (Stomach)	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	2	..	..	..	..	..	..	..	..	..	..	1	..	..	..	..	..	..	3
Congestive chill	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	2	..	..	..	..	..	..	1	..	1	..	..	..	..	..	..	5
Consumption	10	3	1	2	..	4	7	10	..	..	15	2	1	5	3	1	10	50	4	22	1	8	13	8	6	1	1	7	83	22	..	..	..	..	..	..	300
Convulsions	2	..	..	..	..	..	2	3	3	..	3	..	4	2	..	..	3	2	3	2	..	1	1	5	1	1	..	..	15	5	..	..	..	..	..	..	58
Croup	..	..	..	2	..	..	..	..	1	..	1	..	..	1	..	..	2	2	2	..	..	..	..	..	..	..	..	..	2	2	..	..	..	..	..	..	15
Cystitis	..	..	..	..	..	1	..	..	..	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..	..	..	1	2	..	..	..	..	..	..	..	5
Defective vitality	..	..	2	..	..	..	..	..	..	..	2	..	..	..	..	..	1	6	..	..	..	..	..	..	..	..	..	..	12	..	..	..	..	..	..	..	23
Delirium tremens	..	..	..	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	2	..	..	..	..	..	..	..	3
Dentition	..	..	..	..	..	..	..	..	..	..	..	1	1	..	..	2	6	5	1	..	..	..	..	1	..	..	..	..	12	1	..	..	..	..	..	..	30
Diarrhœa	5	..	..	3	..	1	2	4	1	2	10	5	5	2	2	1	8	5	2	4	3	4	3	3	4	2	..	5	25	12	..	..	..	..	..	..	123
Diabetes	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	1	..	..	..	..	..	..	..	..	1	..	2	1	..	..	..	..	..	..	6
Diphtheria	..	1	..	..	..	..	2	..	..	..	1	..	..	..	..	..	1	..	..	..	..	..	2	..	..	..	..	..	4	1	..	..	..	..	..	..	12
Dropsy	4	..	..	3	..	..	3	1	1	..	5	1	1	1	..	..	2	5	3	3	1	..	3	3	4	1	..	..	13	2	..	..	..	..	..	..	60
Drowned	..	..	..	..	..	..	3	1	8	..	..	1	..	..	..	..	1	2	3	4	..	1	1	3	2	..	..	..	..	5	..	..	..	..	..	..	35
Dysphagia	..	..	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1
Elampsia	1	..	..	..	..	..	..	1	..	..	..	1	..	..	..	..	..	..	..	..	..	..	..	..	1	..	..	..	1	..	..	..	..	..	..	..	6
Eczema	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..	..	1
Ephysema	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1
Encephalitis	..	..	..	..	..	1	..	..	..	..	2	..	..	2	..	..	..	..	1	..	1	..	..	..	..	..	..	..	6	4	..	..	..	..	..	..	17
Enteritis	1	..	..	..	1	..	3	..	..	..	2	..	..	..	..	..	..	12	..	2	..	..	..	..	..	..	1	..	9	6	..	..	..	..	..	..	37
Entero-colitis	5	..	..	..	..	..	1	..	2	..	..	..	..	..	..	..	..	9	..	4	3	..	..	1	..	..	1	3	4	..	..	..	..	..	..	..	33
Epilepsy	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	1	..	..	..	..	1	1	..	..	..	2	..	..	..	..	..	..	..	7

Digitized by Google

DISEASES.	Alachua.	Bradford.	Brevard.	Columbia.	Dade	De Soto.	Duval.	Escambia.	Franklin.	Hamilton.	Hillsboro.	Jefferson.	Lake.	Leon	Levy.	Manatee.	Marion.	Monroe.	Nassau.	Orange.	Osceola	Polk.	Putnam.	St. Johns.	Santa Rosa.	Suwannee.	Taylor.	Volusia.	Jacksonville.	Pensacola.	Total.
Erysipelas																				1										1	3
Exhaustion																	2														1
Fever (Catarrhal)		1													1											2					4
" (Congestive)		5									5						24			9		3	4		3	6	11	2	31	5	172
" (Malarial)		2																				1				1				1	9
" (Puerperal)																															1
" (Scarlet)		6									13	1					1	8		5	1	8	1	5		3			29	27	183
" (Typhoid)		1																1											2		6
Fracture of skull																															2
Fracture of spine																															1
Frozen																	1														1
Gangrene											2							2											7	2	22
Gastritis											2							1		1			1						9	3	23
Gastro-enteritis											1							1											4	1	10
General Debility		2									4	3						6		6			3	14					24	11	188
Heart Disease		5		1	1	1	4	4	2	2			3	1			8	18													16
Hemorrhage (Bowels)				3		4		2									1														7
" (Cerebral)		1					1	1	1								1	1			1				1				2	1	7
" (Lungs)															1			1		1											4
" (Puerperal)																		1													1
" (Umbilical)								1																					2		3
" (Not Stated)																				1									5		6
Hepatatis		1																4											1	3	13
Hernia																				1		1									3
Hip Disease																															1
Homicide		1																											1		3
Hydrocephalus						1																									3
Inanition								1			3		1		1			51	3	1		1	1						19	11	98
Influenza																		1	1	1									1		6
Insanity									1																						1
Internal injuries																		1												8	9
Intestinal obstruction																													1		1
Intussusception																															1
Invagination																															1

Digitized by Google

| | | |

DISEASES.	Alachua.	Bradford.	Brevard.	Columbia.	Dade.	De Soto.	Duval.	Escambia.	Franklin.	Hamilton.	Hillsboro.	Jefferson.	Lake	Leon.	Levy.	Manatee.	Marion.	Monroe.	Nassau.	Orange.	Osceola.	Polk.	Putnam.	St. Johns.	Santa Rosa.	Suwannee.	Taylor.	Volusia.	Jacksonville.	Pensacola.	Total.
Stomach, Cirrhosis of																													1		1
Stomatitis	1																														1
Suffocation																	1														1
Suicide	1		1					1		1			1			2		2		1				2					2		14
Syncope														1																	1
Syphilis	1			1			1	2										3											8	1	19
Tetanus									1		1					2	1	4				2	2	5		1			3	1	23
Thrush									1																				1		2
Tonsilitis																															
Trismus nascentium								6			1				1			37	5				1	2					6	9	68
Tumor (Bladder)																		1													1
" (Breast)																													1		1
" (Cerebral)																														1	1
" (Ovarian)				1					1															1							3
Ulcer (Bowels)																								1							1
" (Stomach)	1																						1	1							3
Uræmia	3								1		1							1		1				1					6	2	16
Vermes																						1			2	1				1	5
Wounds (Railroad cars)								3				1							1			1			2						8
" (Crushed)																	1	2													3
" (Fall)									1				1					1		1									1		5
" (Gunshot)	7		1	2		1	2	1	3		3	1	1			1	4	1		1	1	1	2		2				3	3	41
" (Cut)	1																					1				1					3
Cause not stated	5			1		3	20		3		12	7		5			9	9	7	6	1	10	3	8	1		4	4	15	1	134
Totals	145	19	5	61	9	31	83	99	49	16	147	63	28	50	20	20	142	490	96	130	27	96	90	139	57	33	31	53	687	295	3,241

Digitized by Google

FIFTH ANNUAL REPORT

OF THE

STATE BOARD OF HEALTH

OF FLORIDA.

JACKSONVILLE, MARCH 31, '94

JACKSONVILLE, FLA.
TIMES-UNION PRINTING AND PUBLISHING HOUSE
1894

SPB
Digitized by Google

Digitized by Google

FIFTH ANNUAL REPORT

OF THE

STATE BOARD OF HEALTH

OF FLORIDA.

JACKSONVILLE, MARCH 31, '94.

JACKSONVILLE, FLA.
DACOSTA PRINTING AND PUBLISHING HOUSE.
1894.

Digitized by Google

OFFICERS AND MEMBERS

OF THE

STATE BOARD OF HEALTH OF FLORIDA.

HON. W. B. HENDERSON, President, Tampa, Fla.

HON. J. P. TALIAFERRO, Jacksonville, Fla.

DR. WARREN E. ANDERSON, Pensacola, Fla.

DR. JOSEPH Y. PORTER, State Health Officer and Secretary, Key West, Fla.

Office of the Board, Jacksonville, Fla.

Digitized by Google

PRESIDENT'S REPORT.

To His Excellency, Hon. Henry L. Mitchell, Governor of Florida:

SIR: The statute requires that the President of the State Board of Health shall make "an annual report to the Governor of all expenditures, in a clear and concise statement, together with any special observation, recommendation or facts that he may present, that would be conducive to the health and sanitary conditions of the State;" therefore, in compliance therewith, and in accordance with the expressed wishes of my confreres of the Board, I desire to invite your attention to some matters connected with the Health Protective System of Florida, which the Board, at its recent annual meeting, judged should be presented to you for careful consideration.

The annual report of the State Health Officer enters so fully into the detail management of health affairs, narrating all important happenings in this line, that it is only necessary that I enclose the same to you as containing a replete statement of chronological facts in the Board's history of the past year.

It is with pleasure, in which I know you will share, that the Board announces no visitation of epidemic disease during the past year; especially is this a matter of satisfaction in our methods when it is remembered that Yellow Fever during several months last summer threatened the State on both the northern and southern borders. Small Pox and other diseases of infectious nature have been reported in nearly every other State, and Florida had to stand guard on her border lines to fight back the diseases that evidenced a less zealous care of the public health on the part of our neighbors. The feasibility of maintaining

Digitized by Google

through our ports commercial relations with the south lying countries with safety to the public health, during the summer months, has also been demonstrated to the gratification of the Board. The successful operation of the quarantine "plants" at Pensacola, and Mullet Key in Tampa Bay, has induced the Board to make the necessary appropriation for the erection of a similar equipment at Fernandina. The necessity for an efficient plant on the Atlantic coast has long been apparent to the Board, but, for the lack of means, the erection of this known aid to commercial intercourse in safety had to be postponed. The Fernandina plant is to be of the style of the one now at Mullet Key, and the apparatus will be according to the most approved pattern, and in harmony with the latest accepted views of maritime sanitists. It is reasonably safe to say that this station will be in operation during the present season, when, with the other coast protection, Florida will be effectually bulwarked against the importation of disease, whether from the Gulf or Atlantic.

The Board is unanimously of the opinion that all health protective measures of the State should be, to secure the best results, under one authority, nor should this responsibility be divided, and as a move in this direction it earnestly recommends that all the quarantines in the State be maintained under the authority of the State Board of Health; a matter which the Board trusts may be favorably presented by you in your next annual message to the Legislature. A fact in this connection worthy of your Excellency's attention is, that the fees, when collected, will be amply sufficient to maintain the maritime health service without additional cost or help from the State.

In regard to internal sanitary measures as distinguished from coast protection there might be a great deal said, but the remarks of the State Health Officer on these

Digitized by Google

subjects are so full of practical suggestions that I refrain from going into detail. I may mention, however, that as vaccination is known to afford immunity to small pox the board solicits your assistance in presenting this matter to the legislative portion of the State government, urging a statute which will compel those in attendance upon schools in this State and in the employment of factories to be vaccinated as a pre-requisite of entrance. This enactment could very wisely be made to include the gangs of railroad laborers also, as they are of a transient class and are likely transporters and transmitters of many diseases. The board also asks your Excellency's consideration of the questions of sanitary nuisances, which is so concisely and clearly discussed by the State Health Officer in his report. The board agrees with the State Health Officer as to the necessity existing for a clear and definite statute on this subject. The Legislature should define what are sanitary nuisances prejudicial to the public health and provide for a speedy and simple method, divested of all technicalities of law, by which the suppression of these nuisances can be effected by the State Board and its agents. The Board has had so many complaints of late from individuals and citizens collectively of the apathy and indifference on the part of municipal governments to give relief in this particular, that it would seem that a way should be provided, first to determine what are nuisances calculated to produce disease, and, second, a remedy by abatement.

Much time and attention has been given to the collection of the life data of the State, and the methods employed, with deductions arrived at are very interestingly set forth in the State Health Officer's reflections on the subject. While, as I understand, the collection of vital statistics in this State is yet in its infancy and thus necessarily somewhat incomplete, it however, tends to show a

Digitized by Google

relative mortality rate which is flattering to our State. In view of the fact that this data is collected mainly in a manner that entails no cost to the State aside from the clerical work of compilation, the Board most respectfully recommends it to your approval.

The scares of last summer, comprised in the Pensacola cases and the Port Tampa affair, are freely discussed elsewhere by the State Health Officer, and I merely allude to them here to indicate to your Excellency the very admirable management of the same. When it is considered that the Brunswick trouble, in a neighboring State, which gave rise to great confusion in commercial traffic and travel therein, occasioned to Florida no interruption of trade, and but slight uneasiness on the part of her citizens, the benefits arising from a State Board of Health, with full and discretionary authority in matters of quarantine, can be best understood and appreciated, and I believe the more the public seriously consider these matters the less willing will the citizens of Florida be to surrender their State police powers in the matter of health protection.

There is yet another matter which the State Board requests that I bring to your notice and solicit your sanction and co-operation. The continual visits to our western coast of Spanish smacks engaged, it is known, in illicit traffic seriously menaces the health of the State by Yellow Fever. The Board thinks that authority should be vested in the State Health Officer and his deputies to make arrests of these and other offenders against the quarantine laws and regulation of the State *without warrant*, turning the offenders over to the Sheriff of the nearest county as soon as possible, or practicable, after arrest, and to try the same before a court of competent jurisdiction in the county delivered, irrespective of the waters of the county where the arrest is made. Your Excellency can well under-

Digitized by Google

stand that by the methods now in vogue it is almost an impossibility to capture, or punish, these offenders against the health of our State, for a complaint must be first sworn out against the culprit before a Justice of the Peace (who resides not infrequently many miles distant), and a Sheriff, or his deputy, sent to make the arrest. In the meantime "the bird has flown," for transgressors of any law do not generally wait passively for arrest. If your Excellency will invite the attention of the next Legislature to this and other points mentioned herein, the Board feels that a hearing and favorable action will be taken.

In conclusion, I desire to commend to your Excellency, in which the members of the Board heartily join me, the faithful, conscientious and pains-taking labor of the employes of the Board during the past year. The work of the Board has been accomplished without friction, and in a manner to obtain most excellent results, all of which are now submitted to your Excellency and the public of Florida to express thereon both opinion and decision. I am, Governor,

Very respectfully,
WM. B. HENDERSON,
President State Board of Health.

Digitized by Google

Digitized by Google

HEALTH OFFICER'S REPORT.

JACKSONVILLE, FLA., March 31, 1894.

To the Honorable President and Members of the State Board of Health of Florida:

Following the usual custom at this season, the report of the Secretary and State Health Officer for the year 1893, is herewith submitted, for such action relating to its further transmission to His Excellency, the Governor of Florida, as you and they may deem advisable.

The constant and attentive reader of the monthly publication and various bulletins of the Board during the year will recognize in the within report many chronological facts which have been previously published; some of them are now presented in the original form as first made mention of, and others in slightly altered dress of phraseology, but distinctly recognizable. Pardon may perhaps be asked for this repetition, but it is thought in a history of yearly events, such as an annual report is proposed to outline, an interest in the subject discussed is enhanced, rather than diminished, by a connected record of the work and efforts of the Board, and may therefore be considered as a compilation of what has been previously written with reflections and suggestions for future public improvement.

The last annual report concluded the recital of service of the Board during the period for which it had been appointed by the former State administration, and it was then remarked that the Board had occasion to feel a pardonable pride in the success that it had achieved during the four years of its incumbency. Its administration had not only inspired confidence and respect at home among

Digitized by Google

the people it was especially charged to serve, but it had likewise earned the esteem and confidence of sanitary bodies and the public in general throughout the country. This has very clearly been made manifest by commendatory notices in sanitary journals of other States and from letters and communications from different sections of the United States. By its firm but conservative course of action the Board has suppressed frights, averted panics and contributed to build up the commercial interests of the State. The State Board of Health, dealing with the responsible questions of the life of and the preservation of the health of the citizens of Florida, has always been thoroughly conscious of the responsibility of the position in which it was placed, and has ever tried to conduct the health affairs entrusted to its care in an equitable and intelligent manner.

The State Board of Health has always been consistent in its acts and teachings. It has tried to suggest and advise only those measures in hygiene and sanitation which are capable of practicable application by the people of Florida. It has carefully avoided theoretical discussions and matters that are purely medical. It understands that its duty is to teach how to *prevent* disease and not to *cure* it. It has pleaded for cleanliness, individual, domestic and municipal; for better drainage and disposal of sewage of the towns of the State; has warned against the marriages of those of sickly constitution or hereditary taint, and, in fact, has dealt solely with those questions that could be well understood by the average reader or individual citizen. The NOTES the "State Board of Health in print" has, through its limited space, endeavored to establish the proof of the healthfulness of Florida, and to justify the claim made by its citizens of a natural sanitarium, by publishing each month a record of vital statistics, and endeavoring to create an interest in preventive remedies,

Digitized by Google

indicating how certain diseases can be avoided, and what sections or counties, by the exemption of certain diseases, are presumably adapted to the cure or treatment of those disorders. These are subjects in the line of sanitation which, it is believed, the general public will listen to and become interested in. Unfortunately, man thinks to protect his interests in almost every other way except in the line of health. It cannot be said that sanitation is a popular subject with the public. It is rather looked upon as a fad of the doctors, and unless the subjects generally known as hygienic measures are placed before the public, stripped of all theories, and are common sense in application, the work of the sanitist is for naught. Idiosyncracies are never considered to be truths or safe guides to follow in any occupation of life, much less in matters that pertain directly to the art of living. The public wants practical teachers, and the State Board of Health seeks to be this medium.

GENERAL HEALTH.

It is a cause of sincere congratulation that the executive officer of the Board is enabled to state that during the past year Florida has suffered from no epidemics, although Yellow Fever was more than usually severe in Havana, and an epidemic of this disease prevailed at Brunswick, Ga. This immunity, it is thought, is due entirely to the vigilance exercised over travel, and the active supervision of maritime medical inspection. The seaport cities of the State have enjoyed more perfect health during the past twelve months than for many previous years. This has been the comment of practitioners of medicine throughout the State. The "Continued Fevers" were less in prevalence, and the monthly reports of the agents of the Board continually testified to the camparative healthfulness of the entire State. Of the preventable

Digitized by Google

diseases that have occurred in different portions of the State none can be traced to distinct *foci* within the State, but in every instance the cases occurring were found to have been imported from bordering States or States at a distance. This is particularly true of Diptheria, and the cases at Mohawk, in Lake county, are cited, where it was positively ascertained that the disease was imported from Connecticut, through a visiting member of the family.

Of the preventable diseases the mortality has been:

Bulletins of the births, marriages and deaths reported by physicians, midwives and others during the year have been published monthly in the "Florida Health Notes." The deaths from all causes in a population (census) of 391,422 numbered 3,219.

From these reports we find that Consumption caused 385 deaths during 1893; being a death rate of 0.983+per 1,000 of population. Of this nnmber 98 were Floridians, 137 were from other States, 86 were foreigners and of 64 the nativity was not given. Forty-eight (48) were life residents, 51 had resided in Florida less than two (2) years and the remainder had made their homes in the State for varying terms of years.

Malarial fever was the cause of 183 deaths during the year, or 0.467+per 1,000 of the population. Pneumonia caused 162 deaths, a rate of 0.411+per 1,000; while 129 or 0.329+died of heart disease, and 83 (0.212+ per 1,000 of population) were caused by Typhoid Fever.

In the Appendix will be found various statistical tables compiled from the reports received during the year.

The number of cases of consumption, which seem apparently to occur among the native population, it is thought to be due to the fact that the genial climate and balsam-ladened atmosphere of Florida, holding out inducements of return to health and usefulness to those whose hacking coughs and wasted frames had been con-

Digitized by Google

demned in a Northern clime to an early grave, has, and continues to, attract large numbers of this class of invalids to the State, who by free intercourse and with no precautionary measures taken, have tended to inoculate or transmit the disease to the native population. This subject has attracted so much attention during the year that on behalf of the Board the State Health Officer has by warnings and advice sought to imbue the people of the State with the necessity for caution in caring for this class of invalids, both in the domestic circle and in places of public entertainment.

YELLOW FEVER.

Yellow fever was reported during the past quarantine season at the station of the Escambia County Board of Health (Pensacola, Fla.) and at the United States station at Tortugas.

On July 22d the Spanish steamship "Leonora" arrived at the Pensacola Quarantine Station from Sagua la Grande, three days voyage, having touched at various infected ports within the previous ninety days. No sickness on board on arrival nor during the cruise. Water ballast. The ship was disinfected and fumigated on the 24th and placed in five days detention for observation. On the 26th a sailor was taken to the hospital, having had fever one day. He returned to the vessel on the 28th "very well." On the 27th another man was taken sick and admitted to the hospital on the 28th. On the 28th a third man was sent to the hospital with slight fever. On the 29th a fourth man was sick and placed in the hospital on the 31st. On this day one sailor admitted to the hospital, as reported, on the 28th, was discharged, leaving two of the vessel's crew still in the hospital. On August 1st both cases had developed into Yellow Fever.

Digitized by Google

The "Leonora" was at once ordered to the Chandelieur Quarantine Station (U. S. Govt)., and the State Board of Health communicated with by the Escambia County Authorities. Dr. R. C. White, Physician in Charge of the Escambia County Quarantine Station, isolated the cases and quarantined himself with attendants who had come in contact, and Dr. W. E. Anderson, local member of the State Board of Health, assumed charge of Dr. White's duties in his enforced absence. The "Leonora" returned to Pensacola August 11th, after undergoing disinfection at Chandelieur and without developing any sickness at that point.

On August 8th the British barkentine "Antilla," from Havana, arrived at the Tortugas Refuge Station. In entering the harbor the vessel got ashore and was not docked until the 11th. The captain was taken ill shortly after leaving Havana and died of Yellow Fever the afternoon of August 12th, nine hours after being taken ashore. No other members of the crew were reported as stricken down. The first mate had been left at Havana, sick with the disease, and the second mate had recovered from an attack before the vessel's departure.

No further cases were reported at the Florida quarantine stations and the disease was successfully managed and confined to the stations designed especially for the treatment of such sickness.

The bark "Anita Berwind" from Havana, which had been permitted to pass the Brunswick, Ga., quarantine without sufficient detention for observation, proceeded up the Satilla river, to a lumber mill, where her captain died of yellow fever. This circumstance attracted much attention from the sanitary authorities of neighboring States, and fear and suspicion were expressed of tho quarantine methods practiced at the port of Brunswick. So pronounced was the distrust of these quarantine ad-

Digitized by Google

ministrative methods that the Treasury Department, through the Marine Hospital Service, arranged with the local authorities to take charge of, and manage the maritime health supervision of the port of Brunswick. No ill results in the way of transmitting the disease seemed to have followed the case of the captain of the "Anita Berwind." The non-existence of a State Board of Health in Georgia, or any central State Health Control, afforded the Treasury Department of the Government, under a recent act of Congress, an opportunity to assume authority in the premises and all persons who had been directly connected with the captain of the bark were hunted up by Surgeon Carter of the Marine Hospital Service, and sent to the Government Quarantine Station at Sapelo Sound. Quarantine matters in Georgia after this quieted down until it was announced on the 12th of the August, that Surgeon Branham of the Marine Hospital Service, who had been placed in charge of the Brunswick Quarantine Station, had developed yellow fever and had been removed from the station to the city of Brunswick. This young officer subsequently died and other cases followed.

It is not proposed to enter into a history of this epidemic, even if it were possible to do so, for until very recently it has not been satisfactorily explained how the disease was introduced, and the subject is left to the Marine Hospital Service to discuss. A full and detailed report will probably be given to the public in a few months. It is fully appreciated how difficult a matter it is to gather information of a valuable nature, bearing upon the introduction of any disease, particularly so when individual and commercial interests might be important witnesses in the matter. Therefore Surgeon Murray is to be commended for the patient and persevering manner pursued by him by which he seems to have satisfactorily and successfully solved the question. The

Digitized by Google

existence of epidemic disease anywhere is a matter of interest and solicitude to health officials, and their desire is in the line of suppression of disease and preservation of life; but only so far as it threatened to invade Florida was the epidemic of yellow fever at Brunswick, Ga., a matter of any serious moment to this State Board of Health. Not being able to leave Pensacola when his presence was required, the State Health Officer, requested the Assistant State Health Officer, Dr. J. Louis Horsey, then at Fernandina, to visit Brunswick and to make a personal examination of such cases as might be permitted, with the view of ascertaining for the State Health authorities of Florida the true character of the sickness then prevailing at Brunswick, and such other information as might be serviceable in determining the character and amount of restrictions demanded on commerce and travel from that portion of Georgia to Florida. The report of Dr. Horsey, on his return, will be found in the Appendix to this report. Inspection service was immediately established on the State line, where the usual routes of travel from Brunswick entered the State, and no one was admitted who could not furnish satisfactory evidence of their whereabouts for the previous ten days, or had not a certificate of immunity from a duly accredited officer of the United States Government having charge of the train inspection service in that portion of Georgia. In addition to this, the border counties were placed on guard by warning against tramps and stragglers, and agents were appointed by the State Board of Health to especially care for these matters. That no sickness from Brunswick was introduced into Florida is sufficient evidence of the activity and vigilance displayed by these special agents and railroad train inspectors, and it is also in evidence that the prevention of the introduction of Yellow Fever into Florida from Brunswick was also ef-

Digitized by Google

fected with no damage to commercial interests, and with the least possible annoyance to travel. The restrictions against Brunswick were enforced until it was announced by the surgeon in charge of the Government Relief Measures at that place that the epidemic had ceased, and that there was no further danger from Yellow Fever to be apprehended, which announcement was not made until the advent of freezing weather—December 1st.

SUSPICIOUS RUMORS.

Although the State was particularly free from diseases of all kinds, and especially epidemic diseases, yet the season was not allowed to pass without rumors of suspicious sickness, which demanded immediate and careful investigation; and these rumors were more than ordinarily annoying and vexing from having a semblance of authority in support of them.

On the evening of the 9th of August, 1893, the State Health Officer, then in Jacksonville, received the following telegram from Dr. R. W. Hargis, President of the Escambia County Board of Health:

"Two deaths from Yellow Fever. Premises isolated and guarded, and effects destroyed. No cause for alarm."

It was remembered that the annual encampment of the State militia would convene the next day at Ocala, and that troops forming a part of that encampment were then on their way from Pensacola and rapidly nearing their destination. The official telegram from the President of the Escambia County Board of Health was so positive in character, intimating no doubt as to the nature of the sickness, that it appeared to the State Health Officer to be his imperative duty to prevent a large collection of persons from Pensacola being introduced into an assemblage of healthy individuals from various sections of the State.

Digitized by Google

Although the hour was late, a hurried consultation was held with the resident member of the State Board of Health, and the decision arrived at to speedily intercept the Pensacola companies of militia. Through the courtesy of the Western Union Telegraph Company—for it was then long after hours of service—the Adjutant-General of the State was notified at Waldo of the reported state of affairs at Pensacola, and the cars with the Pensacola troops were detached and ordered back to Pensacola the next morning. The State Health Officer left by the early train on the morning of the 10th, and the next day, by the direction of the President of the Board, and in conformity to the Statute, assumed charge of all health affairs of the city of Pensacola and county of Escambia, arranging to have the details of his instructions as regards surveillance and supervision executed through the local health authorities. As soon as possible the supposed infected localities were visited and an investigation into the cases instituted. In this investigation the State Health Officer was assisted by Surgeons Murray, Carter and Magruder of the United States Marine Hospital Service, who had been ordered to Pensacola to the assistance of the State Board of Health, and to them the State Health Officer is indebted for valuable services rendered. A thorough investigation of the reputed cases of Yellow Fever, commencing first with a conference with the physicians attendant on the cases and those performing the *post mortems*, failed completely to elicit any satisfactory evidence upon which to base diagnosis that the parties died of this disease. The facts in the case of the child, Ellen Wood, were not as clear and negative of Yellow Fever as those in the case of Rev. Waite, and to allay apprehension consent was given to disinfect and cleanse the Wood premises, which service was performed under the personal supervision of the State Health Officer, assisted by Surgeon

Digitized by Google

Murray. Copies of the bulletins and statements of the State Health Officer, issued during the period of control of health matters in Escambia county by the State Board of Health, together with various correspondence, record of the cases and *post mortems* furnished, and other matters of interest connected therewith are given in the Appendix for the information of all interested.

Before closing this subject it is desired to invite close attention to what the State Health Officer considers to have been an important, if not a principal, factor in producing the state of affairs at Pensacola, just noted, and as tending to create distrust and alarm on the part of the nervous and hyper-suspicious portion of the population of that city. In July Captain Northup, of the tug "Echo," died from what, at that time, was said to be Typhoid Fever, but from what the clinical history as given by the consulting physician (the medical attendant was absent from the city when this information was obtained) clearly pointed to Congestive Malarial Fever. At the time of the captain's death there does not appear to have been any suspicions aroused as to any contagious nature of his sickness. Being a popular citizen a large concourse of friends attended his funeral, the body having been previously embalmed by Undertaker, Mr. John C. Wood. Previous to the death of Captain Northup he had been to Key West with his tug from which point he had towed to Pensacola for repairs a wrecked schooner, the "Benj. Hale." It is also said in going to Key West the tug assisted over the bar at Charlotte Harbor an English tramp steamer ladened with phosphate. The schooner "Benj. Hale" with a cargo of barbed wire from Boston, went ashore April 18th, on the reef near Tortugas, and remained in a half sunken condition for weeks when she was raised and taken to Key West, where she was again partly submerged at the dock for several weeks more,

Digitized by Google

prior to being pumped out and towed to the Pensacola ship-yard. The schooner was perfectly free from any suspicion and had not been in any suspicious tropical port for two years previous. It can be positively stated that the schooner "Benj. Hale" and her crew did not threaten any port with sickness, for having a hole in her bottom through which there was for weeks an ebb and flow of the tide she was perfectly clean and healthy. It can not be learned that attention was attracted to this schooner and Captain Northup's connection with her until the death of the child Ellen Wood, whose father, an undertaker, had embalmed the captain and conducted the funeral. Whisperings were then heard among the "knowing ones" until from frequent repetition it was assumed as a fact that Captain Northup had died of Yellow Fever and the child, Ellen Wood, had contracted the disease through the handling of her father, with whom she was a great pet. It will thus be seen that assuming the premise in regard to the infection of the schooner "Benj. Hale" to be correct and that Captain Northup came in contact with the yellow fever poison in Key West, it was very easy to trace the infection, and with some of the symptoms manifested to make out a case of Yellow Fever. Investigation into this subject brought out certain other facts which it will be also as well to bear in mind. There appeared to be a distrust of the local quarantine at Pensacola by some of the citizens, with a constant suspicion of Key West during the summer season. This distrust was so firmly, although unreasonably, impressed upon their minds that it influenced to a great degree the feeling of apprehension of these cases and biased judgment of otherwise careful observers. The State Health Officer discusses this subject with more than ordinary reluctance. He is conscious that in differing with the opinions of his profes-

Digitized by Google

sional brethren of Pensacola, who treated the cases, he lays himself open to criticism in forming opinions and making decisions on *ex parte* evidence, as he neither saw the cases during life nor witnessed the *post mortems;* but he is nevertheless warranted in expressing the belief that a careful and impartial consideration of all facts, including the clinical histories as furnished by the medical attendants, when divested of the bias heretofore referred to, confirms the position taken by himself and the experts of the Government sent to Pensacola. He disclaims any reflections upon the professional attainments of the medical gentlemen directly concerned in these cases and credits them only with the possibility, liable to occur to any human being, medical or layman, and which happened subsequently to himself: that of being mistaken, but an error on the side of safety and precaution may well be excused as one on the side of carelessness and danger may be condemned.

THE PORT TAMPA AFFAIR.

Before the fright at Pensacola had been fairly allayed and the cause removed, the State Health Officer was, on the 19th of August, summoned to Tampa by a telegram from the President of the State Board of Health. Through the courtesy of the officials of the Pensacola Division of the L. & N. R. R. a special train was offered, and leaving Pensacola that night at 9:30 o'clock the State Health Officer arrived in Tampa the next afternoon. On this trip he was accompanied by Surgeon Murray of the Marine Hospital Service, who, having completed his duties at Pensacola, was returning to his own station. On arriving at Tampa it was learned that the cause of the trouble at Port Tampa was, that the steamer "Markomania" had, the afternoon previous, been sent to the Government Quarantine Station at Dry Tortugas, but the

Digitized by Google

docks at Port Tampa and Port Tampa City were, by direction of the President of the Board, kept under surveillance, and guarded by an armed patrol against the outgoing of all persons from these points. The steamers of the Havana line and Manatee region communicated through Hillsborough Bay, thus practically shutting off the docks at Port Tampa from all outside communication. After five days surveillance, and no cases at all suspicious in character developing, the restrictions on travel from the above named points were removed. The "Markomania" having been sent to Tortugas, tidings from her were awaited with great interest. On the night of August 21st Surgeon Murray left for his station (Tortugas), and on Friday, the 25th, a telegram and telephone message from the Port was received at Tampa, saying that the "Markomania," with Surgeon Murray on board, had returned to Port Tampa, and awaited the inspection of the State Health Officer. Inviting Drs. Weedon and Wall, the gentlemen who had declared the sickness on the "Markomania" to be Yellow Fever, to accompany him, the steamer was reached about half an hour before sunset, and as many of the crew were examined as possible before dark, when the further examination was postponed until next morning, communication with the shore being interdicted in the meantime. It is a matter of record that the "Markomania" had no Yellow Fever among her officers or crew, and she was, accordingly, the next morning, given *pratique*, on the judgment of the State Health Officer. A concise and condensed history of this vessel, with clinical notes, thermometric observations of malarial patients, correspondence and other papers connected with the "Markomania" will be found in the Appendix.

When the "Markomania" returned to Port Tampa fears were very generally entertained as to the sickness

Digitized by Google

on her at the time of her departure for Tortugas. The medical gentlemen of Tampa, who on the 19th of August declared it to be Yellow Fever and who caused the ship to be sent to Tortugas, held to their opinion. The local press were alive on the subject and unjustly suspicious of the methods and workings of the State Board of Health. Excitement and alarm increased with the fears which gave birth to expression. The State Board of Health suddenly found itself on trial before a jury of its fellow citizens. The sickness which had been on board the "Markomania" was the accused party, but the Board of Health, its reputation and worth to the people of Florida were also arraigned if mistake should be made in the failure to prevent introduction into the State at Tampa. The duty then of the State Health Officer was to give the community the benefit of the doubt and not the case itself; hence when young Neuman, who was employed at the Port Tampa docks and had visited the "Markomania" developed within forty-eight hours a type of fever which simulated in pulse and temperature a mild case of Yellow Fever, both the State Health Officer and Surgeon Murray considered it proper as a precautionary measure to make a declaration of their suspicions in favor of safety to life, to commerce and to freedom of intercourse and to impose at once all safeguards, to the end that this dread disease should be shut out of the State at this port. The disease developed later into malarial fever, the diagnosis was corrected, the guards that had been imposed were removed and the wisdom of the course pursued was established by the results. The principle of giving the community the benefit of the doubt rather than the fever itself should obtain when necessary. The Board has no sensitiveness to soothe because of this diagnosis made in the interest of the highest science—disease exclusion—and the same course when a like doubt arises may be ex-

Digitized by Google

pected, in view of like excellent results. In concluding this subject it may be remarked that the medical interest in the Neuman case centers in the fallibility of certain diagnostic signs which had formerly been considered as pathognomic of Yellow Fever. In the fevers of the Tropics when the parity of the pulse with the temperature was decidedly unequal, with hot sweating skin, the case was formerly looked upon as suspicious; therefore when young Neuman showed these symptoms, naturally, an apprehension was aroused as to the character of his illness, which was only completely dispelled when the paroxysm of fever was broken up by quinine administered in liberal doses. It is but fair, however, to say in this connection that of all the medical men at a distance, of experience in Yellow Fever, to whom the clinical record of this case was referred, all but one expressed an opinion that the symptoms justified the apprehension in all particulars.

VITAL STATISTICS.

In this department of the Board much encouragement is felt in the progress made during the year in collecting the life data of the State. Attention has been directed to this subject in former reports and its importance dwelt upon. Various methods had been adopted to gather the birth and death statistics, and up to the year just concluded the results had been only partial. Formerly the collection was made through the County Boards of Health and the City Boards, but only twenty-eight of the forty-five counties in the State had health boards, and even in those the work was imperfectly done, because it was said that physicians and midwives failed to report their cases; so that the columns at the end of the year represented only an imperfect record, very

Digitized by Google

unsatisfactory except for partial deductions. But better things were constantly hoped for, and after much thought was given to the subject and many plans discussed by which such results could be had, the Board finally decided that the County Judges being the recorders already under the law of marriages, could, with very little trouble and slight expense (which the Board was willing to defray), receive the birth and death reports from the different portions of the county, record the same and transmit a copy monthly to the office of the State Board. Accordingly, a bill embracing these points was prepared, and having received the approval of the Health Committees of both branches of the Legislature, was introduced and strenuous efforts made for its passage. Unfortunately the majority of the members did not deem the collection of vital statistics of great value, for the measure failed. When the measures offered at the last session of the Legislature to improve and strengthen the State Board of Health Statute, failed after enactment, through Executive veto, it seemed that this branch of the work of the State Board would have to be suspended or abandoned. But the Board was not inclined to contemplate this extreme course, for it had spent much time, thought and hard work to awaken an appreciation of the subject on the part of the people, because of its importance now and to future generations. The Board then sought for a plan not only to preserve the records already provided but to make future collections of more value. It had been so frequently made the excuse by County Boards of Health for imperfect returns rendered, that the physicians would not report cases—some boards advising legal steps should be taken against such derelicts—that the State Board was doubtful of good results to be obtained from this source. But the State Health Officer always had faith in his medical brethren

Digitized by Google

—it was but natural that he should—and had likewise firmly believed that upon a proper presentation of the value of the information to the State which the medical men of the State monthly obtained through their practice, and the desire of the Board to tabulate this information, assistance would be cheerfully furnished, if it was not at too great an expense in time and money to the individual contributor. It is gratifying to record that in this belief the Executive of the Board has not been disappointed, and with almost a solitary exception the physicians of the State have cheerfully and promptly complied with the request made of them and adopted the suggestions and plans of the State Board. The Executive Officer of the Board realized at the very organization of the State Board of Health, when the subject of vital statistics and other matters relating to the medical profession were embraced in the Regulations of the Board, that without the moral and substantial support of the medical profession of the State the work would be a tedious struggle for the attainable, hence efforts were early put forth and pleadings made for aid. The plan submitted to the profession in July last and which has given such good results, was that every licensed physician in the State, and midwives, would be furnished with postal cards directed to the State Board of Health, having the information desired printed on the back. On the occurrence of a birth or death these cards to be filled out and mailed. But a fraction of time is consumed, and no expense, the cards being furnished free. The results have been exceedingly flattering, and in so short a time far exceeded the expectation of the executive officer. This is especially gratifying to note, as confirming the opinion expressed in the last annual report, that the State Board could better deal direct with the public on this subject, and on other health matters in the State, than through the intervention of County Boards of Health.

Digitized by Google

The expense to the State for this section of the Board's work has been forty-five dollars per month, which is for postage, stationery and clerical help and tabulation. When it is stated that the State Board of Health has to deal with some twelve hundred physicians, midwives and nurses, the magnitude of the work of collecting the vital statistics of Florida can be better appreciated, and the reader can understand how faithful attention to this duty on the part of all citizens who are requested to make reports tends to lighten the labor. Before dismissing this subject, which has already been discussed at length, an extract from the most excellent report of the State Board of Health of New Jersey for last year is here quoted, as having a decided bearing on the subject, and particularly applicable now to Florida. The distinguished and thoughtful Secretary, Dr. E. M. Hunt, says:

"While it often requires patience to await the lapse of years in order to secure sufficient numbers from which to deduce conclusions, and very much care as to combinations to be made, and results to be affirmed, there is already such progress in the right direction, and such consciousness, that important material is being accumulated for future study, as to furnish encouragement to all workers in this line.

"Their meaning and value is thus well expressed in one of the earlier Massachusetts reports: 'Statistics may be defined the science or art of applying facts to the elucidation and demonstration of truth. They form the basis of social and political economy, and are the only sure ground on which the truth or falsehood of theories can be brought to the test. Mere columns of figures may or may not be statistics. They form in any case, a small part only of the illustration; combination and deduction are required to give them full effect. We belong to that class of statists who have no particular fondness for figures, though we have a great fondness for facts. We use figures as the representatives of facts, not fiction; of truth, not falsehood; and find them very convenient for

Digitized by Google

that purpose. We find it very difficult to prove or disprove many propositions without them. We are aware that some persons have a great antipathy to facts and statistics but in this matter-of-fact age they are required, and they are far more useful and important than the fiction and theory, the assumption and assertion, that have occupied so much of public attention. We would follow, in estimating human life and human health, in all their various departments, bearings and relations, the same course that judicious men pursue in other matters.

"The state and condition, the statistics of a country, can be known only by gathering together the facts as to its movement and progress; and the statesman looks at the figures which represent these facts, and combines and deduces the truths they contain, for his guidance.

"There is great need that physicians and sanitarians have very definite ideas of what constitutes proof, or evidence, in the study of the causes and courses of disease. Every sphere of reasoning must have its laws. In mathematics there is one special kind of proof, so convincing that when we write our Q. E. D. we know that we have reached a certainty. In logic we are able to proceed from premise to conclusion, according to the laws of reasoning which have commended themselves to profound thinkers, and which are accepted as conclusive. Where there are limitations, or exceptions, these have been defined with a clearness and precision which gives definiteness to conclusions. Thus the mind that is capable of logical analysis, and those minds capable of following its methods and weighing its results, have a definiteness of conviction well nigh indisputable. * * * *

"When we come to medical or sanitary evidence, although a department of experimental inquiry, it is more complicated and empirical than any other. The life, which is the subject, does not submit to crucible or any form of laboratory test with precisely the same rules that apply to matter in other forms. The strange admixture of bone and nerve and flesh, of organ and function, of body, mind and spirit, gives us for analysis something without a parallel in any other of nature's products. It is a case in which the foundation of our evidence must

Digitized by Google

rest on observed facts—facts which as to their reality are often obscured by too early attempts to reason as to them. What is the fact? What constitutes it a fact? What is the assurance that my senses and other instruments of precision observe correctly? What are the possibilities as to its non-reality as a real fact just in the sense and to the degree that I view it as such? Questions such as these are to the front, and are too often pushed back or obscured by reason—prejudice and imagination stealthily gliding into their place.

"The physician or the student seeking for the causes of things in animal hygiene, has this simple but severe problem, just to get at facts, such as come from the closest observation, a sufficient number of times by competent observers. It is a case of witness-bearing, of testimony, of direct and cross-questioning, often as severe and acute as that of any lawyer or jurist, and when well executed often shattering a fair story and a self-deceived witness into minute fragments.

"We have illustrations of the value and completeness of such proof. In the midst of prevalent small-pox, when ninety-nine out of a hundred of those exposed catch the disease, I vaccinate a thousand equally exposed, and not one of these catches it. There may be some minor side questions as to how many such contrasts I must produce, or how many different persons must produce them in order to prove my point, or how I am to account for now and then one in a thousand who nevertheless catches the disease, but my fact still responds to the demands of experimental evidence. It is not shaken by any question of how or why it does it, by profound opinion, 'that there is no scientific support for the practice, and that it is destined in more enlightened times to fall into desuetude,' (Crookshank) or by the view that although the sheep pox, horse pox, and cow pox are distinct, 'yet the inoculation of the virus of any of these affections may be so modified as to protect from small pox in man.'—(Fleming).

"A fact is one thing; our ability to account for it is another thing. Such a fact as this remains.

"So in regard to quinine as an anti-periodic and

Digitized by Google

prophylactic in a class of seizures, such as chills and fever. Its power to interrupt malarial forms of disease is a matter for testimony, which, if sufficient in quantity, and after a rigid cross-examination, found adequate in quality, proves the fact independent of all inquiry as to reasons therefor. It is for this reason that to be able to closely observe and accurately record a fact, unbiased by any hypothesis as to it, is the most elegant attainment of the practitioner of the preventive or the healing art.

"It is for this reason that the numerical method of studying disease, introduced by Louis and approved (often better than followed) by modern medicine, has given to statistics a valued place in the study of disease, and made such observation and experience the chief reliance of practical medicine. The evidence rests upon the accuracy of observation, the number and capability of observers, the minutæ with which they record their observations and a number of records adequate to make applicable the mathematical 'Law of Probabilities.'

FINANCES.

While regretting that the finances of the State Board of Health are not in as satisfactory a condition as is to be desired, it is not intended by this statement to convey the idea that there are no funds available for meeting the current or running expenses of the Board during the coming year, but that there is no reserve from which the Board can draw for the construction of necessary protective plants and for emergencies which may arise. When the Fourth Annual Report of the Board was written in March '93, there was to the credit of the State Board of Health from all sources, $7,000.00; since that period there has been received from the assessment on taxation, $30,000.00, making a total to the State Board of Health at the first of January, 1894, of $37,000.00. In addition to this the Board has received from inspection and disinfection fees at the quarantine stations operated by it during the past

Digitized by Google

year, or rather to the first of March 1894, $9,051.08 and from subscription to the "Florida Health Notes," $59.00, making a total of $49,110,08 at the close of the past fiscal year. Of this amount the Board has expended for current monthly expenses, $28,638.13 which includes pay of employes, office expenses, maintainance of State quarantine stations operated solely by the State Board of Health, printing and distribution of pamphlets and papers and the expenses incident to the Pensacola and Port Tampa affairs and the protection against Brunswick, leaving to the credit of the Board on the first of March 1894, $17,471.95. The Comptroller estimates that there will accrue from the collection of taxes for health purposes for the year 1893 about $20,000.00, which, be it understood, includes the total levy made in 1893 for State Health purposes. Therefore it will be seen from advices received from the Comptroller there will be probably available to the State Board of Health during the year 1894, $37,471.95.

When the Legislature of 1893 abolished County Boards of Health in all but two counties—Escambia and Franklin—it was estimated that a saving to the people of Florida would be made in the matter of health taxation of about forty or forty-five thousand dollars. The statute for the late County Boards of Health authorized the collection of a one-mill tax for county health purposes, and this in addition to the one-half mill tax to be levied for the State Board of Health. On the supposition that each county in the State had a Board of Health, and that this full levy was made and collected, an estimated sum of eighty or ninety thousand dollars would annually be contributed by the people of Florida for county health purposes alone, but as many counties of the State had no Boards of Health, and in others the full levy was not collected, and in some instances no tax at all was collected,

Digitized by Google

but an appropriation was made by the County Commissioners from the General Revenue Fund of the county for such amounts as the Boards might make request for, it was not possible to determine or obtain definite information from the County Commissioners as to the exact amount which the County Boards of Health had cost the people in the past, but sufficient information was obtained to enable a safe estimate to be made of the amount previously given, namely, that of forty or forty-five thousand dollars. It is certainly true that the Act of the Legislature in abolishing these Boards of Health was in the direct line of economy, and was a pecuniary relief to the people of the State, but it was also effective at an additional cost to the State Board of Health, as upon the Board was placed the responsibility of caring for the local health interests of the counties, as well as the general health interests of the whole State. When the proposition to abolish County Boards of Health was discussed in both branches of the last Legislature, the question was asked how, or what measures were proposed, to take the place of the County Boards in looking after the local health interests of the several counties, and the answer was made by the advocates of the measure of abolishment that the State Board was sufficiently empowered to appoint such agents and officials as might be deemed necessary to carry out the general health regulations established by the Board, and such additional rules as in the future the Board might deem necessary. In fulfillment of this quasi promise, the State Board of Health has appointed agents in many of the counties of the State, and when suitable men can be induced to accept the position for the small compensation given, it is proposed that every county shall have an agent or representative of the State Board. These agents receive a nominal salary of ten dollars per month. To them matters of local health interest are referred, and

Digitized by Google

from them information obtained. By their presence they render prompt aid by advice in suppressing and removing many sanitary nuisances. These agents make monthly reports to the State Board of Health and oftener if occasion demands, giving in detail the health conditions of the counties and such matters of interest as are instructive and useful. The reports are published monthly in the official bulletin of the Board, presenting information of the different sections of the County and embracing vital statistics of the entire State. It is estimated to pay these agents will cost about six or seven thousand dollars, and the nature and character of the work performed by those already appointed demonstrates to the State Board of Health that much more valuable work can be accomplished and the health interests of the counties and generally throughout the State can be better conserved than by the old system of County Boards of Health. It was remarked in the last annual report, which will bear repetition:

"He (the State Health Officer) has faithfully tried, first, to interest the County Commissioners and people, to recommend suitable persons to the Governor for appointment on County Boards of Health, and secondly, has persistently urged organization and action, after appointment; to make reliable the vital statistics of the State by careful and accurate compilation of the life and death enumeration. The efforts in this direction have not met with the success the Board expected. A few city and county Boards of Health have made a determined fight against dirt and disease, and for a better collection of life data, but a larger number of the counties have been apathetic and indifferent to this subject, as is evidenced by only twenty-eight monthly sanitary returns of the forty-five counties in the State, and this number has never reported regularly; so that it would seem that it would result in a more efficient administration and attain results more satisfactory and reliable to repeal the law of

Digitized by Google

County Boards of Health and charge the State Board directly with the management of sanitation, collection of vital statistics and other matters of health supervision. No extra expense would be incurred in this new proposed regime; nor is an extra appropriation asked for, for it is believed that the work can be accomplished by the State Board from the levy now authorized to be collected for the State Board of Health's maintenance and especial fund."

The prediction of a year ago has been more than realized by the good results which have followed in having only one health board—namely the State Board of Health—who alone is responsible to the people for the management of any restrictive measures against possible introduction of epidemic disease into the State. Under the old regime of County Boards and the authority given to them by the Legislature when the Brunswick epidemic of yellow fevor commenced, the quarantines of the different counties against Georgia would have been varied in their exactions and demands on travel, to say nothing of the destructive effect on commerce by not having one guiding and directing authority. In support of this attention has only to be directed to Georgia itself where the transportation companies were unable to properly fulfill their demands of commerce and travel, owing to the diverse local requirements under which they had to operate, scarcely any two being alike. Now compare the two as to cost! The County Boards cost the people of the State about forty or forty-five thousand dollars, in addition to the amount contributed to the support of the State Board, which would equal as much more. A sum of about ninety thousand dollars annually for all purposes. The State Board has done this work, its own, and that which formerly pertained to County Boards of Health, more satisfactorily and efficiently for the health interests of the people, for one-third of this

Digitized by Google

amount, namely, thirty thousand dollars. Therefore when the claim is now made that the health protective interests of the State are now more economically administered than ever before there is merit in the statement. It is scarcely necessary to argue this subject further, as the figures are sufficient evidence to demonstrate in which line economy and efficiency lies. The executive officer of the Board is not in favor of reducing the levy for health purposes now authorized by law. He considers that the Board should have a reserve fund in the hands of the Treasurer of the State, from which it can draw in times of emergency or whenever exigencies require. This fund the Board has no desire to operate or manage, except when necessity demands. There is a sense of security, however, which only those intrusted with life, and the preservation of the same, feel in the knowledge, that should occasion arise, the ready cash is available to pay for prompt aid and intelligent assistance, and this statement is in keeping with the self-respect and dignity of a great and growing State, such as Florida. During the past summer the expenses of the Board were increased by the disturbances in the nature of frights at Pensacola and Port Tampa, and by the necessary guarding of the State line between Georgia and Florida. Available financial means enabled the Board, through thorough inspection service to prevent the entrance of Yellow Fever into Florida from Brunswick. When the disinfection plant to be erected at Fernandina is completed, the erection of which the Board has now under consideration for the protection of the East Coast of Florida, the State will then, it is thought, have a complete system of health protection against exotic disease likely to be introduced through maritime commerce, and with the assistance of the United States Government plant at Dry Tortugas, the coast of Florida, for many years to come, will be amply protected by appli-

Digitized by Google

ances for the sterilization of disease germs. Not only will protection be afforded, but it can positively be stated that with the financial management of the entire quarantine system of the State placed by the Legislature in the hands of the State Board of Health, including the ports of Pensacola and Apalachicola, which are now separately managed, this department of the State could be self-supporting in its operation. By reference to the financial statement it will be seen that the quarantine inspection service at those ports in the State, now under the direct management of the State Board of Health, with the exception of Punta Gorda, Punta Rassa and Cedar Keys, has, since the passage of the Act, been self-supporting, and has yielded a revenue exceeding the cost of maintenance. The opinions expressed by the State Board of Health in its last annual report—the fourth—in regard to this matter of the abolishment of County Boards of Healths as a financial measure to the State has been amply confirmed by the experience gained in this respect since August. Attention is again directed to this subject with a view of having the entire quarantine system of the State placed where it properly belongs—in the hands of the State Board of Health. In again urging the recommendation made in the last annual report that quarantine matters should be alone controlled and operated by the State Board of Health, it is believed that if the next Legislature will so enact, the service will not only be more satisfactory but at no expense to the people of the State.

OFFICE WORK

Has so increased in volume of correspondence and in the compilation of statistical data that it will no longer be possible to continue the work and maintain it to the excellence of the past with the help of but one clerk. The

Digitized by Google

correspondence has more than quadrupled from the first year, and when it is considered that the work usually done or expected to be done by the County Boards of Health in the matter of separating and compiling the different items of vital statistics, is now, since their abolition, placed entirely upon the office of the State Board, some idea can be had of the tax which has been levied upon the office during the past year. Mr. Frank B. Matthews, the Secretary to the State Health Officer, has devoted unusual labor to this especial branch, and to his zeal is due much of the success which has attended the very difficult matter of compiling the movement of the life wave of the State. It will be remembered also that the abolition of the County Boards in all but two counties in the State, together with the failure of the Legislature to provide a suitable substitute in the matter of collecting the life data of the State, with the veto power exercised by the Executive on a measure recommended by the Board and calculated to relieve the Board from much embarrassment in this particular, added considerably to the detail work of the office, as methods had to be thought out and plans formulated by which this most valuable information to present and future generations might still be saved. Attention is also directed to the time and labor which the publication of the monthly bulletin entails. The Health Notes has become the leading feature in the State Board's efforts to impart sanitary information and instructions to the public, and it is believed it has a firm hold upon the confidence of the people and is much appreciated; for it is truly a chronology of the "doings" of the Board and the "happenings" in health matters in the State, month by month. Incidentally it is here mentioned that, as a matter of economy, it can scarcely be expected of the State Health Officer that he will, at considerable expense to the State, expend his en-

Digitized by Google

tire time at the office of the Board in purely clerical work, which can at much less expense be performed by a clerk. Therefore, it is recommended that additional clerical assistance be allowed at the office of the Board in Jacksonville, such additional service not to exceed thirty dollars per month.

FLORIDA HEALTH NOTES.

The Notes, which has been uniquely and appropriately styled "The State Board of Health in Monthly Print" has during the year increased in favor and circulation. Although not yielding a return in any manner self supporting, it has found its way into many households and from many complimentary remarks caught on the wayside of travel, it is known that its influence has been strongly felt in the direction of domestic hygiene and public sanitation. Requests not only for copies, but also for regular supply and exchange have come from points least expected, and the infant venture of the State Board of Health of but a year ago has developed into a yearling of good growth and promising vigorous constitution. If the appreciation of this effort of the Board to diffuse useful suggestions as to caring for the public health and as a record of work in a practical and intelligent manner would only assume a tangible financial form, the Board would be better pleased, as the cost upon the State for this object would be lessened. The subscription price has been placed to cover merely the cost of printing and mailing, and is but a trifle compared with the useful information which it is thought the monthly issue affords. At the annual meeting in May last an amount not to exceed thirty dollars per month was appropriated to defray the printing of the Notes together with the necessary postage for distribution. This

Digitized by Google

amount paid for 1,000 copies. At a meeting on the 27th of February, 1894, an additional amount of $7.50 per month was made and an extra thousand copies were ordered printed and distributed. The State Health Officer would very much like to have several thousand copies of the Notes distributed monthly, and hopes that the State Board may soon see its way financially clear to adopt and order this suggestion.

SANITARY AGENTS.

Carrying out the policy of the Board, as indicated by its previous recommendation to abolish County Boards of Health, when the Legislature confirmed the recommendation by a repeal of the Statute, the Board instructed that as rapidly as possible, consistent with efficient selection, agents should be appointed in the several counties of the State, who should keep the Board advised of the local health conditions, and who should advise with the people of their respective localities as to maintaining the best health, and should also take active cognizance of all sanitary nuisances. A circular of instructions was issued to all who accepted the appointment (See Apendix) and it is gratifying to state that the Board has not had occasion to regret its action in this regard, for the information gained of the health conditions of the various sections of the State, which are published monthly, has been valuable to those within the State and abroad. The agents of the Board, except on the sea-board counties, receive a monthly compensation of ten dollars. The interest felt in the subject of sanitation has been, it is believed, the inducement to accept the position and not the money offered; for the small amount paid does not requite for time lost in acquring information and imparting it to the State Board.

Digitized by Google

In the list of names here submitted for the approval of the Board the State Health Officer believes that earnest and careful gentlemen have been selected for the positions calling for good judgment and calm discretion, and when their authority in compelling observance of sanitary laws in the suppression of nuisances dangerous to the public health is amplified by the Board, or by statutory enactment, a great and lasting benefit will result to the State.

R. A. Lancaster, M. D., Gainesville, Alachua county.
W. R. Chalker, M. D., Lake City, Columbia county.
L. S. Smith, M. D., Arcadia, DeSoto county.
G. W. Lamar, M. D., Quincy, Gadsden county.
D. M. Smith, M. D., Jasper, Hamilton county.
L. W. Weedon, M. D., Tampa, Hillsborough county.
Theo. West, M. D., Marianna, Jackson county.
Theo. Turnbull, M. D., Monticello, Jefferson county.
H. E. Palmer, M. D., Tallahassee, Leon county.
R. T. Walker. M. D., Cedar Keys, Levy county.
E. M. Graham, Esq., Braidentown, Manatee county.
W. V. Newsom, M. D., Ocala, Marion county.
C. B. Sweeting, M. D., Key West, Monroe county.
J. L. Horsey, M. D., Fernandina, Nassau county.
F. H. Caldwell, M. D., Sanford, Orange county.
F. M. Wilson, M. D., Bartow, Polk county.
G. E. Welch, M. D., Palatka, Putnam county.
L. Alexander, M. D., St. Augustine, St. Johns county.
C. E. McDougall, M. D., Milton, Santa Rosa county.
H. F. Airth, M. D., Live Oak, Suwanee county.
C. A. Landrum, M. D., DeFuniak Springs, Walton county.

As soon as suitable persons can be found who are willing to accept this position of trust and responsibility, appointments will be made for the counties not yet provided for.

THE STATE PRESS.

It is observed with much pleasure that, with but two exceptions, the press of the State commended the acts of the

Digitized by Google

State health authorities in the management of the frights and scares and in matters of precaution exercised last summer. In matters of State medicine and the prevention of disease, the State press has ably seconded the efforts of the Board. Several articles on consumption, sanitation, vaccination, leprosy and the cremation of the dead, from the bulletin of the Board, "Health Notes," have been copied and noticed, besides, considerable space and editorial thought has been devoted to these and kindred topics. This is pre-eminetly the age of enlightenment, of education, in matters of health as well as in matters of lesser interest, and the masses are seeking, aye, demanding, to know more about the causes and restriction of disease, of the studies in preventive medicine and the bearings of hygiene and sanitation on the preservation and promotion of life. The daily press but responds to a desire on the part of the people in according questions of this character space and consideration. It is a source of congratulation to note this in the Florida press. An eminent sanitist of the great State of Michigan, the State that, probably, ranks foremost in the science of State Hygiene, has said that the rapid advancement of State and Preventive Medicine in Michigan was due, in a great degree, to the prominence given by the press of that State to all matters relating to the public health. The State Board of Health of Florida invokes the aid of the State press in educating the people to a healthier way of living by pointing out influences which are dangerous to life, and in supporting the efforts of those who are battling against disease and its baleful results. It asks its assistance in discountenancing senseless frights and in suppressing sensational rumors and reports, which are calculated to excite the public mind and produce panics and commercial loss. The Board invites honest and fair criticism of all its acts, and suggests that a word of

Digitized by Google

encouragement from those who are presumed to voice the sentiments of the public, will tend to lighten the labors of all those entrusted with the care of the public health in the State.

SURVEILLANCE AGAINST INTRODUCTION OF EPIDEMIC CONTAGIOUS DISEASE.

For intelligent treatment this subject is capable of division into two sections, maritime medical inspection to prevent introduction from foreign sources, and Inter-State inspection against introduction from neighboring States. In observing these in every important detail epidemic disease has not entered the State through the stations established as guard posts of the State on the coast or border line, during the year.

Since August, 1893, when County Boards of Health ceased to exist, the financial management in health supervision of the entire coast of the State except Pensacola and Apalachicola, from the St. Mary's River on the East to St. George's Sound on the West has devolved upon the State Board of Health. Inspection stations are maintained at Fernandina, mouth of St. Johns River, St. Augustine, Key West, Punta Rassa, Boca Grande at the entrance to Charlotte Harbor, Mullet Key at the entrance to Tampa Bay, Anclote Keys, Cedar Keys, Pensacola and Apalachicola. The two latter are controlled in financial management by the Boards of Escambia and Franklin Counties. At Mullet Key and Pensacola improved fumigating and steam sterilizing plants are in operation, as also hospitals for the treatment of sick. Infected vessels arriving at Fernandina, Key West, Mullet Key, Pensacola and Apalachicola were either treated by isolation or sent to the Government Refuge Stations at Sapelo Sound, Dry Tortugas or Chandelieur Island. As

Digitized by Google

previously mentioned no sickness of an epidemic contagious character entered the State through these stations and no apprehension arose, except in the case of the steamer "Markomania" which was afterwards disproved and the sickness on her satisfactorily determined to be malarial fever. In this case, as has been noted elsewhere, the physician in charge of the Mullet Key Quarantine Station recognized the trouble on the steamer and detained her for twenty-four hours beyond the limit, fearful that suspicion might attach to the vessel and crew. Malarial Fever not being a quarantinable disease he had no authority to prolong her stay at the Station.

The ravages of the teredo having produced such destruction of the piling at the Mullet Key Quarantine Station, it was found necessary, in order to preserve the plant, to substitute other material, and as soon as the quarantine season ended copper-lined pine timber for fender piles were placed in position to support the building. When the Mullet Key Station was first erected the Board had under consideration various kinds of material for piling support. Tubular iron, which would have been the cheapest for durability, was beyond the financial ability of the Board at the time, although recognized to be the best as an economical investment. It was represented to the Board by those supposed to know by experience in bridge building, that creosoted pine had successfully withstood the teredo, and would be the material next best adapted, in point of economy, for the purpose desired. At that time, on account of the depth of water at the point selected for the erection of the station, it was thought palmetto, as a material, would be too springy and admit of too much vibration, which might result in fracture of the piles and subsequent loss of the building and contained machinery; and it was for this reason that palmetto was not originally used, for it had been demonstrated at Key West, where

Digitized by Google

the palmetto is quite extensively utilized in dock construction, that when the heads of the piles are preserved from entrance of water, the pile is of great life and is impermeable to the teredo in those waters. The cost of the repair to the Mullet Key Station, as just referred to, was $3,941.78.

A hospital has also been constructed on Mullet Key, consisting of a small administration section, with detached ward. The whole building is of one story, under one roof and partly surrounded by a piazza. The ward will accommodate eight patients and ten on an emergency, the ventilation and other appointments being sufficient. An appropriation of twenty-five hundred dollars was made by the Board for the erection of this hospital, with necessary furnishings. Members of the State Medical Association, recently on a visit to Mullet Key, commended not only the general plan of the building, but the economy displayed by the Board in this expenditure. The water supply is from natural sources, rain, and is stored in a tank of sixteen thousand gallon capacity.

There is yet needed at the Mullet Key Station, to complete its outfit and make it perfect in all its appointments, a building to house seamen while vessels are being disinfected and cleaned, and to keep under observation the "suspects" of contagious disease. This latter is particularly worthy of consideration by the Board, for the sick being provided for in hospital, others apparently well, but having been suspiciously near or in contact with the sick, should be separated from those to whom no suspicion attaches, and held under observation until the period for development shall have passed. A valuable addition to the means for combatting disease at the station would be a non-contagious disease hospital. For the present, however, the work must be accomplished without it.

Digitized by Google

Urgent and frequent requests to the last Legislature for a committee to inspect the State Quarantine Station at Mullet Key, finally resulted in the selection of the Hons. A. W. McLeran, of the Senate, and A. S. Goodbread and C. L. Wilder, of the House, for that purpose. Delayed *en route* at Jacksonville, the committee visited the office of the State Board of Health and examined the books and the methods adopted for the collection of vital statistics and distributing information of a sanitary nature to the public, and the next morning they were met at Tampa by the President of the Board and State Health Officer, and proceeded to Mullet Key on the State's quarantine tender, "Missoe." A thorough examination of the plant was made by the committee and the workings of the Station and the methods employed were finally explained. On the return of the committee the report exhibited in the Appendix hereto was submitted by them.

The work performed at this station during the year, May 1, 1893, to April 30, 1894, has been, vessels inspected, 298; number of vessels disinfected, 91; passengers inspected and passed, 2,688; seamen inspected, 5,719; aggregate tonnage of shipping passed, 137,883; amount of fees collected, $6,012.40.

The port of Fernandina, on the east coast, is greatly in need of improved maritime disinfection facilities, such as are obtained at Mullet Key. This necessity has been pointed out very clearly elsewhere in this report. At present the service is performed by the discharge of all ballast, mechanical cleaning of the vessel and subsequent washing with mercuric bichloride solution, sulphur fumigation and the necessary detention for observation. This treatment is well adapted to vessels having clean bills of health and no sickness on arrival or during voyage, from suspicious ports of the tropics. Vessels having had sickness on board during voyage, or foul in health, are sent to

Digitized by Google

the Goverment station at Sapelo Sound. This station is at some distance from Fernandina and entails loss and annoyance to commerce in going and returning. The sterilization of *fomites* in the shape of clothing and sailors' dunnage is an important feature in making safe the interior arrangements of a ship, and it is to provide all these necessary requirements of a well-appointed maritime inspection station, and as a valuable conservator of the commerce of a growing port, that a plant is recommended for Fernandina. The health inspection service of the port of Fernandina since August, when the Board assumed operations, has been self-supporting.

The reports from the health departments of the ports of Apalachicola and Pensacola, which in financial matters are under the control of the County Boards of Health of Franklin and Escambia counties, can be found in the Appendix. A summary of the work done at each of the stations, with fees collected, and expense of maintaining stations, is also given.

When Yellow Fever was announced at Brunswick, Ga., the State Board established a train inspection service on the Savannah, Florida & Western Railroad, the Georgia, Florida & Southern, and the water transportation service between Fernandina and Brunswick was suspended. This inspection consisted in ascertaining from every passenger entering the State through these traveled routes a definite account of his whereabouts for the ten previous days, and a demand for a certificate of immunity from Yellow Fever or non-contact, signed by a duly authorized officer of the Marine Hospital Service, which bureau was in control of quarantine matters in and around Brunswick. It was never contended by the State Board of Health that the protection thus afforded was perfect or certain, for it was recognized from the commencement of the epidemic at Brunswick, that to prom-

Digitized by Google

ise that no one could come to Florida from Brunswick without detection would be to falsely state a security which even an army of men in a close cordon on the border of the State would fail to prevent. What was promised, and thoroughly fulfilled, was to reduce the danger of introduction of the disease to a minimum by carefully watching the traveled routes, for the distance to be traveled by other routes and methods would be so great, and compassed with so many hardships and difficulties, that only those in perfect health could undertake it. The inspectors turned back from the State line many persons who were unprovided with proper passports, and forbid their entering the State. This service was satisfactorily performed.

It is gratifying to record the fact that with but one or two exceptions, no community desired during the apprehensive period of last year to return to the old shot-gun quarantine system or even detention, when and where not especially authorized to do so by the State Board of Health. It is indeed a pleasure to note that the people of the State as a whole were not unduly alarmed, but repressed all disposition to panic. They attended to their business and thus manifested their confidence in the ability and power of the Board to manage the situation. Some few individuals became alarmed and one or two towns wanted to stop railroad trains and travelers, and place inspectors of their own on duty. This latter action, it is believed, was more from a desire to do something to appease the timid than from any real fear of invasion of the disease. The people may be congratulated upon their progress in sanitary knowledge in this respect, which is in marked contrast with the acts of the neighboring States of Georgia and Alabama where the shot-gun quarantine, irrespective of necessity, seemed to have been a thing of delight and joy unspeakable. The people of Florida can

Digitized by Google

now contrast the ease and freedom with which they traveled in the State with the condition of affairs which existed in 1888, and must admit that the confidence inspired by the State Board of Health was in itself alone worth the half mill levy which the Legislature authorizes yearly for the maintenance of the State health system. The policy of the State Board is one of strict surveillance to secure the exclusion of contagious quarantinable disease. In the past when the announcement was made of any cases of suspicious sickness in this or neighboring States the demand was immediately made by municipal governments for authority to quarantine. During the past much time has been taken up in explaining the uselessness of sanitary cordons for each individual town, and the methods of the Board to surpervise travel and guard against invasion of infected persons or baggage, and it is gratifying to state that the time and labor expended in thus explaining the operations of the Board in time of threatened danger has been with good results.

To those who claim that it is the duty of the general government to take charge of and defray the expenses attendant on health protection in the States and thus relieve the tax-payers of the expense, this thought is suggested for their consideration: That the general government should aid by advice and in a substantial manner whenever it is asked, and if Florida should get into a "tight fix" again, which is not apprehended, there will be no hesitancy in making the request. The statute creating the State Board of Health of Florida provides for this emergency. It should be borne in mind that when the Marine Hospital Service assumes charge or assists the local health authorities in the management of epidemic disease, its work and aid is confined to the locality or localities infected. The authority of the Government does not extend over the whole State, and the law

Digitized by Google

does not contemplate this procedure. In the absence of a State health authority, local quarantines spring up, under diverse management, more generally than otherwise, with unreasonable restrictions, very seriously damaging the commercial interests of the State and neighboring States, and at the same time do not render the slightest assistance in health protection. In fact, at such a time the State as a health unit has no existence. Lacking efficient supervision, it disappears to be seen alone to consist of a number of disjointed communities, fighting shy of each other, barring the way of intercourse with tyrannical unreasonableness to the destruction of local prosperity and all in the one mad effort for self-preservation. The benefits to be derived and which Florida has enjoyed from a State Board of Health have been those arising from a central control in health matters, covering every part of the State. Instead of a hydra-headed health government, which formerly prevailed, each town for itself, with power to produce by irrational quarantines, incalculable damage to themselves and to their neighbors through local jealousies, Florida has now one central controlling power in health matters, the State Board of Health, through which instruction in sanitation reaches the people, and under whose authority alone can surveillance measures over travel be instituted.

The State quarantine coast patrol steamer "Missoe," on July 13th, for violating the maritime quarantine regulations, seized the Spanish smack "Josefa," while anchored off Passage Key, mouth of Tampa Bay, in the act of communicating with the shore. The vessel was but nine days from Havana (the captain's statement that he had left Cuba three weeks before to the contrary notwithstanding); an examination of her store papers (receipts, bills, etc.), showing she had been in Ha-

Digitized by Google

vana on the 4th of July. She was towed to the Mullet Key Quarantine Station for disinfection and quarantine detention, after which she was turned over to the proper State authorities for prosecution for violation of the State quarantine regulations. It is to be regretted that although conviction promptly followed the trial of this case in the Criminal Court of Hillsborough county, the fine, which was virtually the punishment, was not collected and the convicted violators of the health laws of the State escaped without any punishment, except that which follows the loss of time by detention. The correspondence between the State Health Officer and Sheriff Spencer, which is given in the Appendix, throws all the light on the subject which the State Health Officer possesses.

The "Missoe" was also engaged during the season in driving off a pernicious class of visitors—Spanish smack men—from the neighborhood of Anclote Keys, where they yearly assemble during the fishing season for anchorage and smuggling.

THE SUPPRESSION AND CONTROL OF SANITARY NUISANCES

Demands the thoughtful attention of the Board during this session, in the formulating of some regulations which may now be enforced, or by obtaining from the next Legislature a statute defining what are sanitary nuisances, prejudicial to health and capable of producing disease, and providing a legal way by which such nuisances can be speedily abated. The word "speedily" is used, for if the existence of anything will jeopardize the life or health of an individual, authority should be legally delegated to some one to abate it without having to appeal to the courts with the usually attendant delays. Frequent appeals from the date of the organization of the

Digitized by Google

Board, have been made to the State Health Officer, to take cognizance of certain sanitary defects in cities and towns in the State, and the aid of the State Board has been evoked to either remove what seemed sanitary nuisances or abate them. These appeals have often come as a last resort for relief from nuisances dangerous to health which city, town or county governments have neglected or refused to recognize. No greater compliment could possibly be paid to the State health authorities than this recognition of what the public considers should be its authority or control, and the impression seems to prevail generally through the State that the Board has the necessary authority to require municipal and county governments to properly and sufficiently protect the health of the citizen. The Board should be vested with some such authority. It was sought to remedy this by legislation last year, but failed through the executive veto, and it can be appreciated how helpless the Board is in its power to enforce, by legal means, any measures for the prevention of disease occurring in domestic life, when it is known that under the present statute a poluted well, or a dangerous vault or privy, or any other menace to health, cannot be immediately closed by the Board or its agents. The Board can and does advise, but except in the presence of epidemic disease, or to prevent its introduction and spread, the statute is not very explicit as to the extent of its authority in suppressing the cause of disease. The reading of the law should be so plain as not to require any resort to the courts to define its authority and limitations. The old adage than "an ounce of prevention is worth a pound of cure," is particularly applicable to the matter under discussion, for it is in perfect keeping with the progressive thought of this century.

Digitized by Google

MEETINGS.

Since the publication of the last annual report the Board has had three meetings. The annual meeting required by law, May 1, 1893; a meeting on the 17th of June, 1893, and another on the 27th of February of the present year. At the annual meeting in May last the Board reorganized by re-electing Hon. W. B. Henderson, of Tampa, President, and Joseph Y. Porter, M. D., of Key West, Secretary and State Health Officer. The Maritime Rules and Regulations of the United States as promulgated by the Treasury Department under Act of Congress of February 15, 1893, were considered and referred to the Board's legal advisers. The cost of the maintenance of the employes of the quarantine system of the State was fixed at a rate of fifty cents per diem per capita as the maximum. The State Health Officer was authorized to make provision at Anclote Keys similar to the establishment then maintained at Sarasota Pass. Better facilities for discharging ballast at Mullet Key were discussed, and the State Health Officer authorized to provide "ballast logs" or otherwise make proper provision in the premises. The Rules and Regulations of the Marion County Board of Health were approved, and the appointment of several port inspectors confirmed.

The meeting in June was called to consider needful additions to the regulations, made necessary by the repeal of the law authorizing County Boards of Health, and also the promulgation of the United States Quarantine Law, as well as to advise His Excellency, the Governor, of the financial necessities of the Board in the matter of a tax levy for State health purposes for the coming year. The Board had also under advisement the question of sanitary agents for the counties not provided with County Boards of Health and the erection of the Fernandina quarantine plant. A few changes were made in the Fee bill of

Digitized by Google

charges for inspection and disinfection at the maritime quarantine stations and the furnishing of the recently erected hospital at Mullet Key.

The following resolution was passed, making request of his Excellency to order the full half mill levy authorized by the statute; and the President during a session of the meeting transmitted the same in a formal letter, a copy of which, together with his Excellency's answer, will be found in the Appendix to this report:

"*Resolved by this Board*, That in view of the additional expense and duties devolving upon it in conducting the maritime quarantine stations of the counties bordering on the sea coast of this State, formerly sustained by taxation on said counties, his Excellency, Governor H. L. Mitchell, be earnestly requested to order the levy of the full tax, one-half mill, provided by statute for the support of this board."

The meeting on February 27th, 1894, was called to consider the erection of a disinfection and steam sterilizing plant for the East Coast of Florida, at or near Fernandina. At the request of the Governor the Board met at the State capital. At this meeting the necessities of the East Coast of Florida for more efficient and improved methods of protection against contagious diseases, through shipping from foreign ports, was clearly and plainly defined by the State Health Officer, who explained, it is thought, to the satisfaction of the Board and the Governor, that the growing commerce of Fernandina and Jacksonville with foreign ports, by reason of the lumber and phosphate trade, demanded that the people of this section of the State should be protected by the State in their health interests in such a manner as to least interfere with their commercial prosperity. There was no dissent on the part of the Board or the Governor to these views, and the construction of an establishment, such as was recommended, would have been at once ordered could

Digitized by Google

the necessary funds have been procured to pay the cost of erection. It was thought that the amount of money available for health purposes for the coming year (1894), as elsewhere shown in this report, was not sufficient to carry on the current expenses of the Board, anticipate emergencies in expenditure, such as "frights" and scares, and the construction of this plant in addition. A conference with the Governor and Comptroller was held, in which the matter was discussed, and a proposition was made by the Board for a loan to them from the State Treasury of ten thousand dollars, to be returned the next year by the Comptroller from funds accruing in the usual manner for State health purposes. It was learned that there was no law authorizing such a course, but the necessity appearing warrantable, there was no legal restriction against the State Treasurer assuming the responsibility for such a loan, particularly as no risk was involved, the loan being to the State, and its return amply secured through official action by the Comptroller, a State officer. Unfortunately, the State Treasurer was absent from the capitol at the date of meeting, and his intention or purpose in the matter could not be ascertained. It has, however, been subsequently learned through an official letter to the President of the Board from the Governor that at a further conference of the Board of State Institutions the State Treasurer declined to accede to the request of the Board. This is much to be regretted, as it will probably delay action in affording relief to the eastern coast, greatly to be desired, and justly demanded by the citizens thereof.

DISCRETIONARY AUTHORITY.

Before concluding, the State Health Officer invites attention to a matter which, although delicate in nature, as referring to himself, and is approached with much hesitancy, still one which, under the present workings, it is

Digitized by Google

thought the efficiency of the Executive officer of the Board suffers. The opinion is prevalent that the State Health Officer, as Executive officer of the Board, is vested with some discretionary authority in the enforcement of the regulations of the Board, and surprise is often expressed when the contrary is made known. No set of health or quarantine rules or regulations can be framed that will be applicable to all cases which may arise, and when the health interests of the State, or commerce, will not be injured or threatened, certain latitude, in the way of discretion, should be delegated to the Executive officer to act in the premises as his judgment deems best for all concerned. Oftentimes it is not possible to enforce the regulations according to the letter, as was the case with the sailing ships "Minden," "King Alfred," "Chittagong" and "Eugenie," two years ago. Had these vessels discharged their ballast their condition would have been imperilled. Oftentimes the State Health Officer cannot consult with the President of the Board in regard to matters which arise not provided for by the rules. Along the coast it is not possible to communicate by mail or wire, and, even when permitted by the former method, may entail a delay dangerous to the health interests of the State as to commerce, and to communicate intelligently by telegraph would be very expensive. This matter has been brought to the attention of the Board before in the annual report of 1893, when it was urged in connection with the cases of the unballasting of the vessels above cited. The State Health Officer does not wish to be understood as making a special plea for any concession to the Executive Officer of the Board, or as inviting attention to this subject in a spirit other than as affecting the efficiency of the Board in its general work of conserving the health with the commercial interests of the State. The attribute of "discretion," which is the only prerequisite for appointment as a member of the State Board of

Digitized by Google

Health—"the Governor shall appoint three discreet citizens," says the statute—should certainly be vested in the official having the qualifications designated by the statute for the responsible duty of State Health Officer, in his character of representative of the Board, to the end that this quality of discretion may be made effective throughout the work to which the Board, through him, is called upon in emergencies to perform.

The State Health Officer takes this occasion to thank the Board for the renewal of their confidence in him, which was expressed last May when he was, while contemplating resigning the work, re-elected State Health Officer and Secretary. The re-election, with the very flattering resolutions which accompanied the same, are highly appreciated and will be sincerely cherished.

In the preceding narration of events and transactions, which form the record of the executive office of the State Board of Health for the past year, the State Health Officer has purposed to give a faithful and impartial chronology, with such deductions and recommendations for future legislative action as may enlarge to the State the advantages which have already followed the organization of the State Board of Health of Florida.

J. Y. PORTER, M. D.,
State Health Officer and Secretary.

Digitized by Google

APPENDIX

Digitized by Google

Digitized by Google

Expenditures

FOR TWELVE MONTHS, ENDING MARCH 1, 1894.

Per diem and mileage of members	$ 605 00
State Health Officer's salary	3,000 00
State Health Officer's traveling expenses	593 89
Clerical assistance in office of Board	1,358 66
Attorney's salary	300 00
Inspectors' salaries	1,176 75
Office rent	180 00
Office furniture	9 00
General office expenses	141 43
Printing and stationery	1,368 41
Printing annual report	203 85
Official telegrams	263 64
Maintenance of State Maritime Quarantine	13,799 95
Insurance	375 28
Erection of hospital at Mullet Key	2,300 00
Agents' salaries	1,132 67
Pensacola investigation reputed Y. F. cases	460 27
Protection against Y. F. at Brunswick	869 73
Markomania and Port Tampa cases	370 60
Telephone	60 00
Miscellaneous	69 00
Total	$28,638 13

Digitized by Google

Digitized by Google

PENSACOLA CASES.

On August 9th, the attending physician reported that Rev. F. C. Waite and Ellen Wood had died that morning of yellow fever. The report came to the local Board of Health without any previous notice of even a suspicion of the existence of yellow fever in the city. Steps were immediately taken to isolate and guard the premises where the deaths occurred, both of which were in the northern part of the city, on elevated ground, and separated from each other by about five blocks. An autopsy was held during the afternoon of the same day, and the physicians performing the same decided that both deaths had been caused by yellow fever. Upon this the county health authorities gave notice by wire to the State and United States health authorities, and also to the health boards of the adjacent States. The State Health Officer arrived on the night of the 10th and next morning assumed official charge, investigating the decision of the reporting physicians and the probable origin of the contagion, issuing the following bulletin:

PENSACOLA, FLA., August 11, 1893.

To the Public:

By direction of the President of the State Board of Health, and in compliance with Section 769 of the Revised Statutes of the State of Florida, the State Health Officer of Florida assumes supervision of all sanitary matters in the city and port of Pensacola. The management of details and execution of instructions will be through the executive department of the Escambia County Board of Health.

The State Health Officer desires to say to the public that at this present time there does not appear to be any occasion for undue alarm nor scare. The report on the autopsy ot the Rev. Waite and Ellen Wood having been officially accepted and declared as yellow fever, for the

Digitized by Google

present the State health authorities will act on this declaration and will institute such precautionary measures, looking to the protection of all citizens, as may be deemed necessary.

A house to house inspection has been ordered to ascertain the number of sick in the city and the cause of sickness. The result of this inspection, made as rapidly, but as thoroughly as possible, will be given to the public as soon as completed. An official investigation into the origin of the cases referred to will be commenced at once. There are no reports to the health office of any new cases of yellow fever nor any suspicious cases this morning. The inmates of the houses where the two cases of fever occurred and which are isolated are in good health. The excitement which prevailed during the past two days, it is gratifying to say, has subsided.

The health authorities ask the moral support of the citizens of the State in executing the health laws, and take this occasion to request that each one will exercise the faculty of reason to enable him to suppress fear, allay the apprehensions of the weak and timid and to avert panics, which latter are destructive to all interests of the State. The plain and simple advice is tendered to everyone to attend to the usual lines of business and to leave to those legally entrusted with the care of the public health the responsibility for so doing. There seems to be a disposition on the part of some communities to resort to the pernicious custom of premature quarantine on the the slightest cause and for no good reason, except an unreasonable and senseless fear. These places are reminded that the health laws of Florida forbid the establishment of any quarantine (seacoast or inland) without the authority of the State Board of Health; a measure deemed advisable at the organization of the State Board in 1889 to prevent a destruction to trade and an infliction of unwarrantable indignities and suffering to innocent people.

A bulletin will be posted morning and evening at the Board of Health office in the city, giving an official statement of health matters.

(Signed) JOSEPH Y. PORTER, M. D.,
State Health Officer of Florida.

Digitized by Google

Under the direction of the State Health Officer, acting through the County Board of Health, a house to house inspection was at once begun and vigorously prosecuted, and measures were taken to trace every rumored suggestion as to how yellow fever might have reached the city. Surgeon G. M. Magruder of the Marine Hospital Service arrived on the evening of the 11th, and Surgeon W. H. Carter of the same service on the morning of the 12th. These gentlemen entered at once into a hearty co-operation with the State Health Officer in carrying out his plan of investigation. On Monday, August 14th, the fullowing bulletin was published by the State Health Officer:

To the Public:

The State Health Officer of Florida announces that an investigation into the causes of death of Rev. F. C. Waite and Ellen Wood, who were reported to have died of yellow fever in the city of Pensacola on the 9th day of August, has been thoroughly and impartially made, in which he has been ably assisted by Surgeons W. H. Carter and G. M. Magruder of the U. S. Marine Hospital Service. These gentlemen agree with the conclusions herein expressed. These cases were not seen either in life or death and therefore the opinions hereinafter noted are based on the clinical history of the cases, the record of autopsies, and the statements of the relatives, nurses and friends of the decedents who were in attendance during their late illness.

There is nothing in the clinical history or in the autopsy of the Rev. Mr. Waite to justify a diagnosis of Yellow Fever. On the contrary, he seems to have died from acute Gastro-enteritis, with marked abdominal symptoms.

In the case of the child, Ellen Wood, the opinion is given, that while the record of the case clinically and from the autopsy, does not give a clear history of Yellow Fever, yet it contained sufficient evidence to justify the statement that the case was "suspicious," and demands

Digitized by Google

precautionary surveillance and disinfection of the dwelling and its contents, together with the premises. At this present time there have been no other cases of Yellow Fever nor suspicious cases reported. A house to house inspection which has been made within the last three days and is now completed, discovers no sickness of a suspicious nature among the residents of the city.

(Signed) JOSEPH Y. PORTER, M. D.,
State Health Officer of Florida.

Surgeon R. D. Murray, who had been designated as an Yellow Fever expert of the Marine Hospital Service, arrived on the night of the 14th, and after a thorough examination of the whole matter, fully concurred in the opinion of the State Health Officer and the associate surgeons, as expressed in the bulletin of the 14th. It is proper to add, also, that the statements therein made were in full accord with the opinion of the local health authorities. The following copies of letters, bulletins, etc., are all self-explanatory and furnish those interested with further particulars relating to these cases.

Copy of letter of the State Health Officer to the President of the Board, on the morning following his arrival at Pensacola:

PENSACOLA, FLA., August 11th, 1893.

Hon. W. B. Henderson, President State Board Health, Tampa:

DEAR MR. HENDERSON:—I arrived here last night, quite late; had but a few minutes conversation with Dr. Hargis before retiring, but early this morning took charge and have ordered a house to house inspection, and will interview all the doctors at six this p. m.

No new cases have been reported to the Board, and at present there are no suspicious cases nor cases of Yellow Fever in town, and the inmates of both the isolated and quarantined houses are all well. From present appearances there is absolutely nothing in the situation here to cause alarm, and the "stampede" on the part of the citi-

Digitized by Google

sons of Pensacola. They lost their heads entirely and went "daft" over "getting out."

There is no record of the autopsy of the cases on file in the office of the Board here. The only record is a certificate on a prescription blank in the following language:

"We, the undersigned physicians, concur in the diagnosis of Yellow Fever in the case of F. C. Waite.

(Signed) WM. H. ROSS, M. D.,
J. Z. CRAVEY, M. D.,
F. G. RENSHAW, M. D.,
C. R. OGLESBY, M. D.

A similar one for the Wood child. From what I can learn at this writing, and the evidence before me, I am under the impression that the autopsy was very hurriedly made. The scare is about over and very few leaving the city from alarm.

A meeting of the citizens yesterday petitioned Dr. Wyman to send an expert here, and he answers that he has ordered Drs. Murray, Carter and Magruder here. While I deprecate the action of the citizens as being unwise and decidedly contumacious to the State health authorities, yet I should be pleased to see the medical gentlemen named. They are all friends of mine and will be of much assistance and help. I have engaged the services of a stenographer in order that I may easily keep for record information that is given to me. This service will be utilized this p. m., when I meet the physicians. I issued a proclamation to-day, taking charge by your direction, and giving the people of the State some advice in regard to panics and shotgun quarantines. I have given this to the press as it was too long to wire you.

LATER.—I have a telegram from Wyman saying Murray, Magruder and Carter would arrive to-night. They are ordered to offer me any assistance. Murray is the expert to determine the nature of the cases. I called on Capt. Saltmarsh, the Supt. of the P. & A. road, asking him not to suspend the running of trains, as I had heard he intended doing, because of the alarm it would give and particularly because the situation did not warrant it.

Digitized by Google

I will write you every day and Frank has been instructed to repeat you any wire.

Yours very truly.

(Signed) JOSEPH Y. PORTER.

The following was sent out from the office of the Board to the various State health organizations of the country, in accordance with the agreement of interstate notifications of all cases of infectious or contagious diseases :

JACKSONVILLE, FLA., August 11, 1893.

DEAR SIR :—You are informed that the Escambia County Board of Health, under date of August 9th, reported two deaths from Yellow Fever in the city of Pensacola. Immediately on receipt of the information the State Health Officer was ordered to Pensacola to assume control, on behalf of the State Board of Health, of all matters in connection therewith.

The Escambia County Board of Health, having declared the cases to be Yellow Fever, for the present the State health authorities will act on this declaration and will institute precautionary measures. An official investigation of the cases referred to has been commenced. To date no new or "suspicious" cases have been reported. You will be further advised.

Very truly yours,

(Signed) W. B. HENDERSON,
President State Board Health.

Clinical Notes of Case of Child Ellen Wood :—Dr. W. H. Ross, Attending Physician.

Ellen Wood, six and a half years old, a native of Pensacola. She had not been strong and well for several weeks, though she was not considered sick enough to have a physician. She had had, about two weeks previous, four or five actions one day, but since had not been troubled.

Digitized by Google

She was found to have fever on the morning of August 5th, and later in the day I was sent for. Her mother said that she had been vomiting constantly everything that was given her. She complained of her head, and said her stomach hurt her. Pulse, 100; temperature, 102 1-5; bowels, constipated. She had been given syrup of figs, but had not retained it. She was put on ½-grain doses of calomel, which she retained. 8 p. m., pulse, 100; temperature, 102 1-5.

August 6th: During the night she vomited once or twice, but did not rest very well. She had two small actions and another from an enema. Pulse, 100; temperature, 102. During the day the condition remained about the same, the temperature in the evening standing at 101½.

August 7th: The child had passed a restless night; complained of pain in the stomach, and I found some tympanitis, though there did not seem to be a great deal of tenderness on pressure. Her condition was about the same. I could not get temperature on account of restlessness. She had vomited repeatedly.

August 8th: Another restless night. The skin did not indicate much, if any, fever to the touch, but the child would roll and toss so that I could not get her temperature. She made them carry her from one bed to another, from one room to the other, where she would lie quiet for a few minutes and then begin to roll again. Passed one round worm. This continued until towards midnight, when she threw up black vomit several times and died about 7 a. m. The skin had begun to assume the lemon-yellow hue which was present at the autopsy.

AUTOPSY.

Ellen Wood, white, 6½ years.

External Appearance.—Skin jaundiced and in striking contrast with the marbling and purple blotches in the more dependent parts of the body. Finger tips and margin of ears darkened from stagnant blood.

Liver.—Glisson's capsule was discolored by preservative fluids injected for embalming purposes. Largest lobe

Digitized by Google

having been incised, blood exuded quite freely. Interior dark, and generally congested and exceedingly friable.

Gall bladder contained bile, rather darker than usual and normal in quantity.

Stomach contained a dark, spotted fluid, resembling serum mixed with black pepper or ground coffee (no microscopic examination made); thickened condition of lining membrane, with a reddened and congested appearance.

Intestines red, and congested in places. Cæcum and six inches of small intestines removed. No obstructions found in any part of intestinal tract.

Kidneys congested; capsules easily removed.

Spleen normal in size.

Bladder contained about one drachm of urine.

Interior of abdominal cavity changed by fluids mentioned so nothing as to their appearance could be satisfactorily stated.

(Signed) F. G. RENSHAW, M. D.

Clinical Notes, case of F. C. Waite:

F. C. Waite, 47, small, spare built man, blue eyes, brown hair and beard; has been living in Pensacola over two years. Complexion sallow. Has not had a fever previous to this for twenty-three years. Occupation, architect, was also running a planing mill; was a Baptist minister. Was called to see him August 2d, 1893. He had taken a dose of patent pills the night previous and they had acted on him about five times. He was not feeling well in the morning and did not go down town. About 2 p. m. had a very slight chill and I saw him at 3 p. m. Was complaining of headache and pains in the limbs. Usual signs of fever. Tongue somewhat furred. Pulse 100; temperature 102 1-5.

August 3, 9 a. m.: Found him in about the same condition, except that he had had a number of actions, which were described as green and thin. Pulse, 98; temperature, 102 1-5. While I was in the room he complained of a draught of wind which blew on him and in a few minutes of chiliness.

1 p. m: No particular change except had vomited and fever had rapidly risen. Pulse, 120; temperature, 105.

Digitized by Google

5:30 p. m: Since last visit has taken fourteen grains of phenacitine. Pulse, 120; temperature, 103½.

11:30 p. m.: Pulse, 112; temperature, 102½. Had four more grains of phenacitine since last visit. Still vomiting at intervals. Vomit, dark green mixed with mucous. Had had several small green actions. Examined urine but could find no albumen.

August 4th, 8:30 a. m: Has slept very little during the night. Pulse, 112; temperature, 102½.

2:45 p. m: Pulse 116; temperature, 102½. Had vomited twice.

7:25 p. m.: Pulse, 116; temperature, 101 1-5, Had vomited several times and had several green actions.

August 5, 8 a, m.: Pulse, 114; temperature, 99 3-5. Had vomited several times. Had had several actions, green, with pieces like membrane, very dark, a few specks of blood and black specks about half the size of a pea. Tenderness over epegastrium.

1:25 p. m.: Pulse, 115; temperature, 101½. Vomiting continued several times and had two actions, thin and very dark particles. Great tenderness over the epigastrium on pressure.

7:25 p. m.: Pulse 115; temperature, 102½. Vomited once or twice.

11:30 p. m.: Pulse, 116; temperature, 101 1-5. One action and vomited once.

August 6, 7 a. m.: Pulse 104; temperature, 98 4-5. One action very dark and thin, but not homogeneous. No nausea. Conjunctiva yellowish.

10:35 a. m.: Pulse, 102; temperature, 98 3-5. Vomited once, mucous.

7 p. m.: Pulse, 102; temperature, 99. Vomited once.

12 p. m.: Has had slight convulsion.

August 7, 7 a. m.: Pulse, 114; temperature, 100 1-5. Had two very dark actions; has had three convulsions.

After this I was unable to take the temperature satisfactorily. The interval between the convulsions became less and less. The convulsions continued during the following day and he sank into a comatose state during the night of August 8th, and died at 9 a. m. on the 9th.

I saw him about 8 a. m. on the 9th, and I again saw

Digitized by Google

him at 10:30, one hour and a half after death. The appearance of the skin had decidedly changed and he was becoming of a yellow lemon hue, which color was found well marked at the post-mortem some hours later. I do not believe that there was any complete suppression of urine, and at times he seemed to pass it freely, nor did I find more than a trace of albumen.

Post Mortem Notes:

Case of F. C. Waite. Age 47. Died, August 9th, 1893. Autopsy held by Dr. F. G. Renshaw five hours after death.

Eyes: Conjunctiva injected with yellow.

Skin: The skin was decidedly jaundiced over the entire body; was of a bright lemon color. There were no ecchymotic spots or cutaneous hemorrhages.

The liver was box-wood in color, both externally and on section; about half ounce of bile in gall bladder.

The heart showed fatty change around and near the valves; was not contracted; contents fluid. There was no appearance of clot. Heart was too pale in appearance, externally especially; somewhat so on section.

Intestines were opened from pylorus to the ileum; no obstructions; in the main empty; some thickened mucous and yellowish fluid. Some thickening and whitish appearance of mucous membrane. No ulceration.

The stomach had about six ounces of yellowish contents, which, when tested with pure nitric acid, showed no trace of bile. Mucous membrane catarrhal and ecchymotic; sub-mucous checked in appearance.

The bladder contained two drachms of urine which, upon the heat and nitric acid test (both) proved it contained albumen.

The kidneys were normal in size but fatty in appearance about the pelvis of Sand.

S. B. HUTCHINSON & WM. ROBINSON,
Undertakers (the latter acting).

Present: Drs. R. W. Hargis, President Escambia County Board of Health; W. H. Ross, J. Z. Cravey, F. G. Renshaw and C. R. Oglesby.

Digitized by Google

Letter transmitting specimen of black vomit of Ellen Wood to Surgeon Kinyoun for microscopic examination.

PENSACOLA, FLA., August 16th, 1893.

Dr. Walter Wyman, Surgeon-General U. S. Marine Hospital Service, Washington, D. C.:

DOCTOR:—I send you by express, properly guarded, a small package containing a specimen of the vomit of the child, Ellen Wood, which was kindly given me by Dr. Ross, the attending physician. Drs. Carter, Magruder and myself made such superficial tests as we were able with the insufficient appliances at our disposal, but I would like to have a microscopic examination, if possible, made, and therefore have sent specimen to you, requesting that you forward, without opening it, to Dr. Kinyoun, who, I believe, is at the New York Quarantine. At this writing the situation here remains unchanged. There have been no further cases of suspicious character reported since the two deaths on August 9th, and a house to house examination discovers no sickness of a quarantinable contagious nature. The family of Mr. Wood will be removed to-morrow to a point outside of the city, and and his dwelling will be thoroughly cleansed and disinfected.

Very truly yours,

(Signed) JOSEPH Y. PORTER, M. D.,
State Health Officer of Florida.

WASHINGTON, D. C., August 30th, 1893.

Dr. Jos. Y. Porter, State Health Officer, Jacksonville, Fla.:

SIR:—Referring to the specimens marked "Vomit from the case of Ellen Wood, aged six, died August 9th," I have the honor to enclose you report of microscopical examination made thereon by Passed Assistant Surgeon J. J. Kinyoun, M. H. S.

Respectfully yours,

(Signed) WALTER WYMAN,
Supervising Surgeon-General, H. M. S.

Digitized by Google

PORT OF NEW YORK, August 23, 1893.

Surgeon-General Wyman, U. S. Marine Hospital Service, Washington, D. C.:

SIR:—I have to acknowledge receipt of the letter of Dr. Joseph Y. Porter, Health Officer for the State of Florida, referred to me by the Bureau, and also a package containing a specimen marked "Vomit, from the case of Ellen Wood, aged 6, died August 9th." I have to state that as soon as possible after its receipt, I commenced a microscopical examination. * * * * * I have made a microscopical and chemical examination and find the following:

The stain, when dissolved in a 30 per cent. solution of caustic potassa, revealed blood corpuscles in considerable numbers.

Stained preparations with aniline colors showed, in addition thereto, disintergrated blood corpuscles and epithelium.

Chemical examination shows the presence of bile salts in small quantities.

Very respectfully,

(Signed) JOS. J. KINYOUN,
P. A. Surgeon, U. S. M. H. S.

OFFICIAL BULLETIN.

PENSACOLA, FLA., August 16, 1893.

To the Public:

A statement having been widely circulated that an extensive exodus of panic-stricken people from Pensacola has been continuous since the 9th inst., the date of the announcement of the deaths of the Rev. Waite and Ellen Wood, it will be interesting to note that not more than six hundred people have left the city to all points and for all purposes since that time, and many have returned. The railroad office reports 525 tickets sold, and it is fair to assume that not more than ten per cent. of this number in addition has left the city by other conveyances. This shows that, all imputations to the contrary, the people of Pensacola, although dreading the distress and suffering

Digitized by Google

contingent on an epidemic, have not been unduly alarmed nor willing to act rashly, but awaited as patiently as possible the decision of the proper authorities of both State and National Government or the fiat of fate.

(Signed) JOSEPH Y. PORTER, M. D.,
State Health Officer of Florida.

OFFICIAL BULLETIN.

PENSACOLA, FLA., August 17, 1893.

To the Physicians of Pensacola:

The State Health Officer acknowledges his obligations to the physicians of the city and for the courtesy of a daily report from them of all cases under their professional treatment. Unless cases of a suspicious or questionable nature should arise, in which case he still solicits notification, he sees no further necessity to ask for this additional tax on their time.

The daily bulletin will be discontinued.

(Signed) JOSEPH Y. PORTER, M. D.
State Health Officer.

OFFICIAL BULLETIN.

PENSACOLA, August 18th, 1893.

To the Public:

The State Health Officer expresses the belief that the fears and apprehensions of the health of Pensacola, which for the past week, have agitated the public, involving the interdiction of travel and the consequent embarrassment to commerce, should now cease.

Of the reported deaths on the 9th instant, a thorough and impartial investigation into the history of the cases confirms the opinion heretofore announced that the Rev. Waite did not die from Yellow Fever, and the death of the child, Ellen Wood, from the history was of such doubtful nature as only to warrant the disinfection of the dwelling as a sanitary measure, which precaution the public was entitled to receive by reason of this element of doubt. This has been done under the direct supervision of the State and U. S. Government officers.

Digitized by Google

Since this investigation was begun and during the entire progress, the State Health Officer has been cognizant of all diseases and ailments which have existed or occurred in Pensacola, and is able to aver that no cases have occurred of a quarantinable contagious nature. This fact, coupled with the long period of active and retrospective observation, warrants the statement that there is no Yellow Fever in Pensacola, and no hidden causes which may produce it.

A notable fact in connection with these cases is that during their occurrence, no precautions were taken to prevent any possible infection from them, and free, and unrestricted communication was had with each, notwithstanding which, there have been no developments of a suspicious nature among the non-immune so exposed, and further that the meteorological conditions during that period were peculiarly inducive of Yellow Fever had the germs of the disease been introduced in the place.

Therefore all restrictions and surveillance on travel in the State against Pensacola, being now unwarranted by any facts, are consequently unnecessary, and the further continuance of them will be considered illegal.

It is gratifying and pleasing to note that notwithstanding the excitement which prevailed in this immediate portion of the State, there was no attempt, with but one or two exceptions, to institute shotgun quarantines, which is in marked contrast with a similar state of affairs which followed the events of past years.

The State Health Officer desires in this public manner to officially thank Drs. Murray, Carter and Magruder of the U. S. Marine Hospital Service, for valuable assistance rendered him in the investigation of the disputed cases and in the supervision of active work. The presence of these gentlemen has been exceedingly pleasant and agreeable.

In terminating his special service here, the State Health Officer further desires to express his thanks to the county health officers, the city officials, and the citizens generally, for their assistance in his investigations and for the many acts of courtesy extended him, and more especially for the expressions of faith and confidence which

Digitized by Google

the people of Pensacola have manifested in his judgment and decisions.

(Signed) JOSEPH Y. PORTER, M. D.,
State Health Officer.

LETTER FROM THE GOVERNOR.

TALLAHASSEE, FLA., August 18th, 1893.

Hon. W. B. Henderson, President State Board of Health, Jacksonville, Fla.:

DEAR SIR:—The Board of Health has the thanks of the Executive, and will doubtless have the thanks of the entire State, for the prompt and efficient measures taken in regard to the reported Yellow Fever at Pensacola.

The steps taken by the Board meet my entire approval.

Very respectfully,

(Signed) H. L. MITCHELL,
Governor.

PORT TAMPA CASES.

To the Public:

The State Health Officer desires to state that there is no yellow fever, nor other quarantinable disease at the docks, Port Tampa City or Ybor, and that the establishment of quarintine against this section of the State is entirely unnecessary. The State Health Officer further states that of the cases of fever on the steamer "Markomania" he has no official opinion to express at this time. He did not see the patients and the vessel was sent to the quarantine station at Tortugas before his arrival Sunday night at Port Tampa. When the clinical history of the cases from the physicians here, the quarantine officers at Tortugas and Mullet Key stations is obtained, then a definite opinion can be formed and an official decision given. It suffices now to say that on the supposition of suspected fever attaching to vessel and crew the docks and Port Tampa are held under observation and surveillance for the incubative period of five days and all precautions necessary have been and are being taken. Should any

Digitized by Google

cases of Yellow Fever occur here or elsewhere in the State a prompt announcement will be made, which is in accord with the policy of the State Board of Health of Florida.

JOSEPH Y. PORTER, M. D.,
State Health Officer of Florida.

Dr. Weedon's Notes.—Saw cases on 19th; Capt. Spruk, "Markomania;" at Vera Cruz 23d-28th July; at Tampico 29th-4th August; at Progresso August 6th-8th; at Quar. 11th-17th; at Port Tampa 17th. Eight sailors with fever. 13th, captain and 1st officer.

Dr. Altree's, attending physician, Notes.—Notes, cases of fever aboard S. S. "Markomania," August 18th, 1893.

Case No. 1.—Chief engineer. Taken sick August 16th. Temperature, 102 2-5; pulse, 100. Pain on top of the head. No nausea; no chill; no pain in back or limbs. Albumen found in urine by Dr. Weedon.

Case No. 2.—2nd officer. Taken sick Aug. 17th. Temperature 101. Pulse 105. Felt nervous at night; got up and took fever; had not vomited, but felt sick at stomach; no chills; no pains.

Case No. 3.—3rd engineer. Taken sick Aug 16th. Temperature 103. Pulse 100. No nausea; no chill; no pains; no albumen.

Case No. 4.—Fireman. Taken sick 18th inst. Temperature 104. Pulse 110. No chill; no pains; no nausea; no albumen.

Case No. 5.—Fireman. Taken sick 18th inst. Temperature 103. Pulse 110. No chill; no pains; no nausea; no albumen.

Case No. 6.—Sailor. Taken sick 18th inst. Temperature 102 2-5. Pulse 105. No nausea; no pains; no chill.

Case No. 7.—Boy. Taken ill 18th inst. Temperature 105½. Pulse 130. No nausea; no chill; pain in small intestines; no albumen.

Case No. 8.—Sailor. Taken sick 18th inst. Temperature 103 2-5. Pulse 110. No nausea; no pain; no chill.

Digitized by Google

NOTE.—All these cases taken in the morning of the 18th. The captain had an attack on the 14th inst. Awoke at night with chilly sensations. Vomited in the day, after picking shells on the beach in the hot sun, and had fever. He attended to his duties next day, and has only felt a little weak since. No albumen.

The officers were given 5 1-gr. calomel and soda pellets, with 10 grs. of phenacitine 1 hour afterwards and 5 grs. my. 3 hours until 30 grs. were taken.

The crew, 5 grs. blue mass and 5 grs. calomel, followed in an hour with 10 grs. phenacitine and 5 grs. my. 3 hours until 30 grs. were taken.

I saw these cases about 3:30 p. m., and sent medicine aboard at 7 p. m. At seven next morning cases Nos. 3, 4, 5, 6, and 8 were up and attending to their duties. No. 7 had temperature 104; pulse, 120. No. 1 had temperature 99 and pulse 84; at one o'clock was 100 2-5. Case No. 2 was around on deck; temperature not taken. All the cases had a foul tongue, which in nearly all the cases cleaned off under the purge.

Respectfully,

(Signed) G. H. ALTREE, M. D.

MULLET KEY QUARANTINE STATION,
TAMPA BAY, FLA., August 22, 1893.

Dr. Joseph Y. Porter, State Health Officer:

DEAR SIR:—I have the honor to report to you that the German steamship "Markomania" arrived here from Progresso, Mexico, with a clean bill of health, signed by the Mexican consul. The crew were examined, as usual, one by one, and found in good health. The vessel was disinfected the 11th instant, the same day of arrival, without neglecting any of the rules prescribed by the Board, including the previous mechanical cleaning, and was anchored half a mile from the station for observation. On account of the crew not being all acclimated, the observation was kept very close, not only by my visits but sending Capt. Bahrt every now and then to mix with the crew (he being a German), to try to find out any sickness. On the 15th the Captain reported to me that he had a

Digitized by Google

chill in the morning, and some vomiting and torticolis, but not headache or any other pain. When I saw him the pulse and temperature were normal, and no trace of albumen in the urine. I suspected malaria and ordered thirty grains of quinine, divided into three doses. From that moment the symptoms did not come back, and when he left he was perfectly well, with good appetite. The same day I noted the chief engineer sleeping on deck and suspected him, but he told me the mosquitoes did not let him rest the night before and he was tired, but had no pains. I found his pulse and temperature normal. After that I watched both of them very close, and never found anything suspicious in them. The balance of the crew were seen at meals, always in good health. Five days after disinfection I found everything in good shape to let the steamer go. She had been twenty-one days from any possible infection, and was perfectly clean and all well on board, but on account of the captain I kept her until the 17th, in the afternoon, when I had no more reasons for holding her any longer, and I discharged her.

Yours truly,

(Signed) D. M. ECHEMENDIA,
Physician in Charge.

PORT TAMPA, FLA., August 25, 1893.

J. Y. Porter, M. D., State Health Officer.

DEAR DOCTOR:—In accordance with your request of August 21st, I visited Tortugas Quarantine on August 24th and carefully inspected the German Steamship "Markomania," in company with Dr. A. L. Pendleton, A. S. S. M. H. S., in charge of the station, and made a detailed examination of every member of the crew. I found, as Dr. Pendleton had done before my arrival, that no one was suffering with Yellow Fever or other quarantinable disease; also that no member of the crew of thirty-seven has ever suffered from Yellow Fever. The vessel having been at Tampico for six days incurred the risk of malarial fever from which ten or twelve have suffered, and eight yet show some signs of it.

Positively there is no Yellow Fever on the ship, and

Digitized by Google

there can be no danger in permitting her to load at any port.

I directed the release of the ship without further detention or disenfection, and she arrived here at 2 p. m., today. The vessel and crew are subject to your final decision before communication with the shore will be permitted. I have come from Tortugas with the vessel in order to communicate with the Surgeon General by telegraph on matters not referring to this vessel.

Yours respectfully,

(Signed) R. D. MURRAY,
Surgeon, M. H. S.

An Exact Copy of the Journal of the Key West Quarantine Station, portion referring to the S.S. "Markomania," and Crew:

SUNDAY, AUGUST 20th, 1893.

At one p. m., a steamer was reported entering this harbor, Capt. B. Johnson having boarded her across the reef to pilot her in. She anchored at the outer quarantine buoy, at which place I boarded her. Capt. Spruth presented me with the following order which had been sent to him by the representative of the State Board of Health of Florida while his ship was lying at the dock at Port Tampa, Fla.:

Capt. Fritz Spruth, S. S. "Markomania":

Your vessel with crew are hereby ordered to proceed at once to the U. S. Quarantine Station at Dry Tortugas, Fla., said vessel being infected with yellow fever.

(Signed) L. W. WEEDON, M. D.,
By order Fla. State Board of Health.

I placed the ship in quarantine at once, about one mile from the shore, and the same distance from the barkentine "Antilla," and after sending hospital steward Goodman on shore for test tubes, acid, etc., proceeded to make an examination of the sick.

The crew consists of 37 men all told, and the captain reported nine as being on the sick list.

I will add at this point that the ship shows by her Consular bills of health that she left Vera Cruz on July 27th, touching at Tampico, where she remained from

Digitized by Google

July 29th to August 4th, when she sailed for Progresso, reaching that place on August 6th and remaining until the 8th, when she sailed for Port Tampa, arriving there a few days later.

The bills of health from the two latter points show that no Yellow Fever existed at these places. While at the former there appear to have been seventeen deaths in the two weeks prior to the ship sailing.

Capt. Spruth informs me that not one of the crew—save himself—went ashore at either of the above places and that the vessel was entirely relieved of her cargo by lighters.

Upon her arrival at the Mullet Key Quarantine Station the crew were all well and the ship was fumigated and disinfected, and after six days detention she was given pratique and sailed for Port Tampa. After being there one and a half days, some of the crew having become ill and the captain having called in a physician in the meantime to treat them, he was visited by a representative of the State Board of Health and served with the above order.

In my examination I was careful to get such clinical history of each case as was possible from the patient as well as the captain. I also made an examination of the urine in five instances selecting it from those whose condition seemed to be the most critical. In no case did I find a trace of albumen.

Of the nine cases reported by the captain, only five had been confined to their berths; none had suffered from severe cephalalgia, or pain in the back, nor had the temperature been at all characteristic of Yellow Fever, and I must say that I cannot coincide with Dr. Weedon's views on these cases. My belief is that these men are suffering from Remittent (malarial) Fever.

MONDAY, August 21st, 1893.

Upon my visit to the "Markomania" at eight a. m. to-day I found all the sick in a much improved condition, no one having fever above 100. I made another examination of the urine with negative results.

At 5 p. m. made another visit to the "Markomania;"

Digitized by Google

all hands improving. Am more positive than ever that the sickness is Remittent Fever.

TUESDAY, August 22d, 1893.

Visited the "Markomania" this forenoon. All the sick better. Made another urinary analysis with the results same as on previous examination.

WEDNESDAY, August 23d, 1893.

The "Markomania" sick are all improving, only one had fever to-day and that was only 99½.

No. 1.—Gastav Romer, chief engineer; age 39 years.

August 20th: Temperature, 99½; pulse, 80; tongue coated. No pain in head or back. Complains of slight giddiness in head. Has had no chill or nausea. No albumen in urine.

August 21st: Temperature, 100; pulse, 85. Condition about the same as yesterday. Examined urine again. No albumen.

August 22d: Temperature, 100; pulse, 90.

August 23d: Temperature, 99; pulse, 88.

August 24th: Saw this case with Dr. Murray. Temperature, 100. Tongue slightly coated all over and tooth-marked. No albumen in urine.

Treatment symptomatic and principally by large doses of quinine. All cases treated the same.

No. 2.—Chas. Bonath, second officer; age 33.

August 20th: Temperature, 99½; pulse, 92. Tongue fairly clean. No chill. No pain in head or back. Complains of being very weak. No albumen in urine.

August 21st: Temperature, 100. Examined urine again; still free from albumen.

August 21st: Temperature, 99. Condition about same as yesterday.

August 22d: Temperature, 100. Examined urine again; still free from albumen.

August 23d: Temperature, 98½. Condition improved.

August 24th: (Saw with Dr. Murray). Temperature, 98¼; pulse, 80. Tongue coated light yellow.

Treatment about same as in case No. 1.

Digitized by Google

No. 3.—Jacobson, third engineer; age 30 years.

So far improved when I saw him on the 20th instant as to require no treatment.

No. 4.—Johan Gwinn, fireman; age 29.

When I saw this party on the 20th instant he complained only of pain in the chest, for which I prescribed cod liver oil. The next day he was at his post of duty.

No. 5.—Franz Langann, fireman; age 29.

August 20th: Found this man upon arrival of the ship to-day with a normal temperature and he has steadily improved ever since.

Case 6.—Jacob Shuness, sailor; age 34.

August 20th: No pain in head or back. No chill. Temperature 101. Pulse 108. Respiration 30. No albumen in urine. Tongue slight yellow coat.

August 21st: Temperature 100. Pulse 92. Respiration 28. Tongue cleaning. No pain.

August 22d: Temperature 99½. Pulse 80. Respiration 24.

August 23d: Temperature 98½. Tongue fairly clean. Respiration 22. Pulse 86.

August 24th: Temperature 98½. Pulse 80. No albumen in urine. Dr. Murray saw this case.

Case No. 7.—Powell Bark. Boy; age 16.

August 20th: Temperature 103, Pulse 116. Respiration 30. No pain in head or back. Tongue coated, yellow and flabby. No albumen in urine.

August 21st: Pulse 96 and feeble. Respiration 28, easy. Temperature 100 6 a. m.; 99½ 4 p. m.; 99½ 12 m. No albumen.

August 22d: Temperature 6 a. m. 98; 12 m; 98½; 4 p. m. 98½. Pulse 84. Respiration 24.

August 23d; Temperature 98½. Pulse 80. Respiration 20.

August 24th: (Saw with Dr. Murray). Temperature 98½. Pulse 96. Respiration 20. Found a trace of albumen by nitric acid test.

Digitized by Google

Case No. 8.—Emil Mach, sailor; age 33.

August 20th: Temperature 102½. Pulse 102. Respiration 28. No pain in head or back. No chill. Tongue yellow coated. No albumen.

August 21st.—Pulse 76. Temperature 98½. Respiration 20. Tougue cleaning and patient improving.

August 22d: Temperature 98½.

August 23d: Temperature 98½.

August 24th: Temperature 98½. (Dr. Murray saw this patient). No albumen.

Case No. 9.—Tugraber, coal passer; age 19.

August 20th; Temperature 102½. Respiration 32. Pulse 100. No pain in head or back. No. chill. No albumen. This boy was taken ill on this date and a short time before the arrival of the ship here.

August 21st: Temperature 99. Pulse 72 feeble. Respiration 28.

August 22d: Temperature 99. Pulse 96. Respiration 20.

August 23d: Temperature 98½.

August 24th: Temperature 98½. Pulse 84. Respiration 20.

PORT TAMPA, FLA., August 23, 1893.

Dr. Walter Wyman, Surgeon-General, Washington, D. C.:

DEAR DOCTOR:—I enclose for your information copy of clinical notes, furnished me by Dr. G. H. Altree, who was the attending physician of the cases on the "Markomania" while at Port Tampa dock, and slip note of Dr. L. W. Weedon, who saw the cases once. As previously wired you I did not arrive here until the vessel had left some twenty-four hours, consequently had no opportunity of seeing the cases. I regret very much that she was not sent to Mullet Key Quarantine, which would have enabled Dr. Murray and myself to have visited her next day, and satisfactorily determined for ourselves the nature of the trouble. Dr. Wall, I am informed, bases his conclusions and opinions more on circumstances than symp-

Digitized by Google

toms, from the fact that the vessel came from Vera Cruz, and that having been disinfected and cargo disturbed, liberated the source of infection to the crew. The cargo, however, I am informed, was taken at Tampico and Progreeso. As Dr. Murray is probably at Tortugas Quarantine Station by this time, I am content to patiently wait for his report on the matter. Dr. Echemendia, the physician at the Mullet Key Station, is positive in his assertion that the men suffered from malarial fever, and that he was not authorized under the law to detain the ship on this account longer than the five days required by United States and State quarantine regulations.

In my wire to you of Sunday night, a mistake was made in giving the pulse of case No. 7, the only man sick when the vessel left here; it should have read 120 instead of 110. In this connection I would like to ask if there is not some way by which the neighboring States can be compelled to observe notification from the National Quarantine Department, of which you are the head, before putting in operation pernicious quarantines, so destructive to commerce and inflicting indignity and suffering upon passengers?

I am very much pleased to observe that nothing in regard to this scare has emanated from your office, and take it that you do not consider the matter sufficiently important to warn against. With regards,

Yours very truly,

(Signed) JOSEPH Y. PORTER,
State Health Officer.

THE PORT TAMPA SUSPECTS.

When the statement was made, on the 21st ultimo, that there was no Yellow Fever at the Port Tampa docks, Port Tampa City, Tampa or vicinity, the promise was given at the same time that whenever the State Health Officer should discover any suspicious sickness of that nature the announcement would be promptly made. Accordingly, on the 28th ultimo, when Phillip Neuman,

Digitized by Google

a clerk in the dock office as Port Tampa, was taken sick, manifesting suspicious symptoms, he was placed under careful observation. These symptoms became bolder and more marked and indicative of Yellow Fever until, at the conclusion of the twenty-fourth hour from the date of seizure, the State Health Officer considered that his official duty permitted of no further delay in informing the public of his suspicions, and that it required him, at the same time, to take all necessary measures and precautions to guard against a transmission of the contagion. This opinion, at 2 p. m., August 29th, was concurred in by Surgeon R. D. Murray of the United States Marine Hospital Service, and the proposed action was by him endorsed as being the official obligations of both to the public. Accordingly, the docks and Port Tampa City were placed under an armed cordon. It was desired, and an attempt was made, to exclude Port Tampa City, but this was found to be impossible, on account of the necessary communication by the dock officials and laborers with their homes, there being no accommodations on the docks to properly isolate and care for such a large number of men.

Sufficient time has elasped to confirm or reject the diagnosis then made, and the State Health Officer now frankly admits that the clinical history of the patient since the 31st ultimo is not sufficiently confirmatory of Yellow Fever, and so states it. He is willing to submit, however, the clinical notes for thirty hours to the criticism of any professional gentleman, and abide the decision or censure of non-prejudiced critics as to whether the symptoms and almost hourly bedside record of this case did not warrant and impose upon him the duty of declaring the case as suspicious and requiring proper surveillance. As a practicing physician, or a quarantine official, at a station in isolation more time could have been taken in which to form an opinion or to make a de-

Digitized by Google

cision, but, as the Health Officer, he was required to act immediately and decisively, and to give the public the benefit of any doubt which might exist. At the time the announcement was made there seemed to be no doubt; and the action taken was demanded by the surrounding and attending circumstances.

The steamer "Markomania" which was sent on August 19th to the Government Quarantine Station at Dry Tortugas by the President of the State Board of Health, on a professional opinion of two medical gentlemen of Tampa that the vessel was infected with Yellow Fever, returned to Port Tampa on the 24th ultimo, with a certificate of free pratique with a letter from the surgeon in charge of that station to the effect that he found no Yellow Fever aboard of her, but that her crew were suffering from Malarial Fever. Before inspecting the vessel an invitation was extended to the medical gentlemen before mentioned and who first declared the sickness on the steamer to be Yellow Fever to be present when an examination of the vessel and crew was made and before pratique here was again granted. It was thought that this act of courtesy was due these gentlemen—that the inspection should be made in their presence. The invitation was extended and accepted. The inspection of the ship's log, the certificate of discharge, a copy of the journal of the Tortugas Station containing a clinical record of the cases while there, and a letter from Surgeon Murray were included in the examination, together with an interrogation of the captain as to the health of the crew since July 28th, 1893. The crew were examined individually until darkness set in and the examination was concluded the next morning, the vessel in the meantime lying at anchor off the docks. The inspection was critically made, and several men, apparently well, were required to stand aside for a more detailed examination and questioning.

Digitized by Google

The next morning before there was any communication with the shore (save by the pilot) the crew was again mustered and looked over. The State Health Officer is now able and willing to affirm that on the 25th of August—the date of the return of the "Markomania" from the Tortugas Quarantine Station—no contagious quarantinable disease existed on her, and he is therefore of the opinion that none of her complement has been sick with any such diease at the Mullet Key Station or subsequently. In this connection it may be interesting to those concerned to note that the chief engineer, who was considered to have had a mild case of Yellow Fever on August 19th, and upon whose symptoms the diagnosis of the disease, it is understood, was mainly based, is again sick with Malarial Fever with a convalescence intervening of two weeks. This re-explosion of the malarial poison would seem to be conclusive evidence that the cases of fever on the "Markomania" were malarial in nature.

The State Health Officer is perfectly willing to stand by the clinical history and record of the cases on the "Markomania," and that of young Neumann. Of the former he had no doubt of immunity when the ship was given pratique. Of the latter he had grave and convincing fears until the expiration of seventy-two hours of illness failed to develop crucial symptoms. As a truthful observer and chronicler of facts, as they present themselves, it is the State Health Officer's duty to be frank and honest with the public, and he will countenance no jugglery or legerdermain of circumstances to give color to pet theories. When a mistake is made it will be stated; and in this instance the mistaken diagnosis was on the side of caution and of the public welfare, and was sufficiently warranted by the facts. The State Health Officer lays no claim to infallibility, nor, as it has been sneeringly charged, with the powers of clairvoyance, but he mod-

Digitized by Google

estly insists, however, that he tries to be honest, conscientious and careful in the discharge of his official obligations and in the trust confided to him.

Philip Neuman, aged nineteen years and six months, clerk in one of the offices on the dock, presented himself to me by Mr. Bradley's directions, at 3:45 p. m., August 28th, 1893, and gave the following history:

On Thursday, 24th, had neuralgia over eye (calls it sick-headache), for which he went ashore and purchased some bromide and was relieved. Thinks he had slight fever, but of this is not certain, and did not quit work. Saturday, 26th, had same thing repeated. Went to Tampa and got some medicine at Leonardi's drug store, and drank some champagne and felt better. Thinks he had some fever that day, but is not positive. Kept on with work; did not give up. After dinner lay down and woke up with a fever. To-day (28th) had slight chilly feeling about 10 a. m. No decided rigor; pain in head; slight nausea; no vomiting; throbbing frontal headache over eyes. Thought he was going to have another sick headache. Examination: Skin cool and sweating; eyes clear; pulse full, 90, and irregular; tongue white-coated and tooth marked and slightly pointed; bowels inclined to constipation. Temperature 101½. Gave five pellets aa Cal., 1-5 Sod., 1 and Ipecac 1-10 gr.

8:45 p. m.—Found patient feeling better; had been asleep; no headache; nausea gone; skin warm; sweating; pulse lost fullness, quick, 100. Temperature 102½; eyes clear; tongue still coated. Medicine not acted. Directed to take five grs. quinine at 4, 8 and 10 a. m.

8:55 a. m., August 29th.—Patient says he feels better; has no throbbing headache this a. m., as yesterday; slept little last night owing to vessel loading near room; tongue cleaner, not quite so tooth-marked; bowels opened

Digitized by Google

once; pulse, 90. Temperature 101 4-5; eyes slightly injected. *Sweating; skin hot under sweat.*

12, noon.—Pulse 84. Temperature 102 2-5; urinated previous to visit; tests, both by heat and nitric acid and Heller's, showed no albumen. *Still sweating, and skin hot under sweat; cheeks flushed,* and neck and forehead congested, slowly reacting from finger pressure. Vomited quinine at 10 a. m. with quantity of clear fluid. Eyes suffused and injected.

2:15, p. m.: Temperature 103; pulse 84. No sweat; more pain. Eyes ache.

4 p. m.: Gave 10 grains antifebrin; ½ grain cit. caffeine. Pulse 72; temperature, 102 1-6. Temperature taken before giving medicine.

5:30 p. m.: Temperature, 102; pulse 80. Has orbit pain. Eyes suffused; slightly injected. No more actions from bowels. Ate nothing all day, no appetite. Sweating profusely over whole body. Skin hot under sweat. Tongue coated and pointed.

8, p. m.: Temperature 99; pulse, 80. Gave one C. C. pill.

10 p. m.: Pulse, 72, temperature, 100. Not sweating. Has had no action from bowels since last visit; has not vomited since morning, nor urinated since 9:30 a. m. Says still has orbital pain and eyes sore and aching.

12, Midnight: Temperature, 100½; pulse, 72; irregular and gaseous feel retarded as well. Urinated; no albumen.

6:30 a. m., 30th: Pulse 59, temperature, 100 1-5. Eyes still ache. Conjunctiva clearer. Tongue, blanket coated fur; pointed. Pulse, intermittent and retarded. Slept well from 12 to 5 a. m. Bowels opened then. (Dr. Murry visited patient during morning in my stead).

3:10 p. m.: Pulse, 58; temperature, 101. Feels bet-

Digitized by Google

ter. Eyes still aching. No pains elsewhere. Tongue cleaning.

8 p. m., (Murray): Temperature 100 1-6; pulse, 66. Has had considerable lemonade since 4 p. m. Wishes no milk now. Gave 5 grains quinine in capsule. Examined urine, no albumen.

9 a. m., 31st: Feels decidedly better. Weak, but no pains except when he raises head, neck aches; little in back also. Conjunctiva slightly yellow; not injected. No watery appearance and all suffusion gone. Tongue much cleaner. Bowels moved; nurse says light brown color; passed water. Pulse, 66; temperature, 99.

1 p. m.: Pulse, 69; temperature, 99 4-5. No albumen in urine.

September 1st, 10:30 a. m. (Murray), pulse, 76; temperature, 99; tongue cleaner; slept well; eats better; relishes food; no albumen; gave quinine.

September 2d. Discharged well.

NOTE.—The previous history of this patient was obtained with difficulty. He was not clear in his statements about his "sick headache" attacks and the time he got his medicine, and therefore whether he had fever or not on the 24th and 26th was doubtful. It was ascertained on the evening of the 30th, from other parties and from the agent of the line, that he had been Assistant Purser on the "Florida," running to Mobile, for three weeks previous to his sickness. The "Florida" plies regularly between Port Tampa and Mobile, laying in Mobile Bay two or three days each trip. Many of the crew of the "Florida" have experienced malarial attacks this season, and had it been known that young Neuman had been a member of the crew, his present illness might not have been viewed so seriously. Attention is, however, invited to the slow pulse and moderately high temperature, which symptoms were not masked by treatment, and also to the return to the abnormal, though not high temperature, after the effects of the antipyretic passed off.

Digitized by Google

The pulse was retarded, irregular and slow before any antifebrin was given, and but one dose of ten grs. was given during the entire illness.

TAX LEVY CORRESPONDENCE.

JACKSONVILLE, FLA., June 16, 1893.

To His Excellency, Hon. Henry L. Mitchell, Governor of Florida, Tallahassee, Fla.:

DEAR SIR:—I am requested by the State Board of Health, this day in session, to state that after careful examination we find that we will require a levy of one-half mill to enable us to efficiently carry out the requirements of the law, and we most respectfully request that you order the Comptroller to levy the full amount for the ensuing year.

Respectfully,

W. B. HENDERSON,
President State Board of Health.

STATE OF FLORIDA—EXECUTIVE DEPARTMENT.

TALLAHASSEE, FLA., June 19, 1893.

Hon. W. B. Henderson, President State Board of Health, Tampa, Fla.:

DEAR SIR:—In reply to your letter of the 16th inst., I will state that prior to the receipt of your letter, one quarter of a mill tax, for quarantine purposes, had been ordered and I do not think it would be best to order a change of the amount to be levied now. There would be a perfect howl go up all over the State if the one-half mill tax were levied.

Further, with all due deference for the opinion of the Health Board, I am of the opinion that the one-quarter mill tax will be amply sufficient. The current expenses of the Board for the past four years has averaged $15,000 per annum and there is now on hand to the Board's credit $23,338.99 which will be increased by some taxes

Digitized by Google

due by the railroads to something over $25,000.00, which, as before stated, will, in my judgment, be ample to meet the current expenses for this year. At least, I earnestly hope this amount will be sufficient, because there is such opposition to increasing this amount that it will greatly increase opposition to our quarantine system. The popular idea was to turn everything over to the Federal authorities even under the one-quarter mill tax and now to double that amount would raise a storm of opposition. I do most earnestly trust that the Board will be able to pull through this season upon the $25,000.00.

Truly yours,

(Signed) H. L. MITCHELL,
Governor.

REPORT OF COMMITTEE OF GULF QUARANTINE CONFERENCE.

Your committee to whom was referred the consideration of the several propositions relative to the regulations of the fruit trade during the quarantine season, beg to report as follows:

First. In order to secure prompt and reliable information as to the existence of yellow fever in the various ports of the West Indies and Central and South America, from which fruit is shipped, it is deemed essential that medical inspectors should be stationed at said ports, with the understanding that the inspectors stationed in the larger towns may have jurisdiction over smaller places within the district.

Second. The duties of the inspectors shall be to report by each and every vessel, and if necessary by cable when practicable, on the sanitary condition of their respective districts; on the existence of contagious or infectious disease within the same; on the compliance by vessels with the regulations issued for their guidance and to perform such other duties as may from time to time be required of them.

Third. It is recommended that vessels engaged in this trade shall, whenever practicable, be manned by acclimated crews.

Digitized by Google

Fourth. In the absence of yellow fever, it is considered unnecessary to place any restrictions upon the manner of loading vessels or upon the character of cargo carried, further than to rigidly exclude household effects, personal baggage, hides, horns, bones and fertilizers.

Fifth. After the discharge of the cargo, every vessel shall be subjected to mechanical cleansing by washing, and afterwards thoroughly disinfected.

Sixth. In the event of yellow fever occurring at any fruit port, trade with that port may be continued under the following additional precautions:

Each vessel to be required to carry a duly accredited medical officer whose duty it shall be to see that all quarantine regulations are strictly carried out. No member of the crew shall be allowed to go on shore, nor any one, except an acclimated loading crew, to come on board. The loading crew to be kept isolated in a locality sufficiently remote from the infected district and while on board the vessel, to be kept separate from the crew. Vessels are not to be allowed to remain at any wharf or near shore after sunset, but must anchor in the open bay at such distance from shore as may be prescribed by the medical officer in charge, and must not return before sunrise. The cargo carried shall be restricted to fruit, rubber and specie. Rubber not to be packed in any textile fabrics, and specie to be disinfected by immersion in boiling water.

Seventh. Should a vessel, having yellow fever on board and carrying a cargo of fruit, arrive at a quarantine station, the cargo may be lightered by acclimated crews or by the crew of the vessel, after which the vessel shall be subjected to the usual detention and disinfection. The clothing of the laborers to be disinfected by steam heat after the discharge of the cargo shall have been completed.

Eighth. Any vessel engaged in the fruit trade, which carries passengers, should forfeit all special privileges and be subjected to the same quarantine restrictions as other vessels carrying passengers.

Ninth. Inasmuch as the quarantine laws and regulations of the United States, as promulgated by the Secretary of the Treasury, April 4th, 1893, are not in accord

Digitized by Google

with certain of the foregoing propositions, it is recommended that such modifications be made in said laws as shall make them to coincide with the views expressed by this conference.

(Signed) G. FARRAR PATTON, M. D.
JEROME COCHRAN, M. D.
R. W. HARGIS, M. D.

REPORT OF LEGISLATIVE COMMITTEE.

The following report taken from the Journal of the Senate is self explanatory and calls for no comments:

SENATE CHAMBER,
TALLAHASSEE, FLA., May 25, 1893.

Hon. W. H. Reynolds, President of the Senate:

SIR:—Your joint committee, appointed to visit and examine the quarantine station at Mullet Key, beg leave to submit the following report:

We took passage from Port Tampa on board the patrol steamer Missoe, accompanied by Dr. J. Y. Porter, State Health Officer, and Hon. W. B. Henderson, President State Board of Health, and in about two and one-half hours, landed at the station, which is located about twenty-one (21) miles southwest of the port, on the island of Mullet Key. The island is a government reservation and owned by the United States, is about ten miles in circumference, and is an excellent location for the station. The building is situated out several hundred feet from land, where deep water can be had for the large boats to come up. It is well made and strongly braced, and is surrounded by sufficient wharves, with a gangway to the land. The force employed there consists of six men, besides the efficient sanitary inspector, Dr. D. M. Echemendia, who is a Cuban, and having had several years experience in the management of sanitary affairs and contagious diseases, renders him a valuable man in that position. The employes are all acclimated, which is a requirement, as no others are employed. These all have

Digitized by Google

rooms in the station building. All the necessary paraphernalia for fumigating and disinfecting are located in the building also.

Wearing apparel, bedding, etc., are disinfected in a large steam cylinder which is heated to a degree of 230°, the heat of which kills all the germs of disease, and the most delicate articles come out without the least injury. Other articles are fumigated with sulphur in a room almost air tight. Pipes are also arranged so that vessels are thoroughly washed out with a solution of proper disinfectants and then fumed with sulphur. An engine and boiler are made necessary for the proper use of the above. The machinery and apparatus were put in motion that the committee could see its practical workings, which was done in a satisfactory manner. Everything about the building is neat and clean and the business is carried on in a satisfactory and systematic way. Records are kept showing name of vessel, number of men on board, where from, amount charged, etc. A building with some six to eight rooms is now in course of construction, out on the dry land, about half a mile from the station, to be used as a hospital in case of sickness.

As per Dr. Porter's last report, the cost of maintaining this station for the year ending May 2, 1892, was $3,961.03. Received for fees, $3,642.50. It is thought that the cost of maintaining this station will be fully met very soon by fees collected. If all the stations on our coast were under the immediate control of the State Health Officer, as they should be, the plant would be self-sustaining now.

The station is in operation each year from May 1st to November 15th, during which time every vessel passing in from foreign or suspicious ports is inspected. We find that the steamer Missoe was purchased at a cost of $5,000, and that an additional $5,000 was expended on it for repairs, making it suitable for the purpose for which it is used. From experienced men we learn that her value now is at least $20,000 which shows that she was purchased at a bargain. From the best information we could gather, we think this boat almost indispensable in the quarantine service for the following reasons:

Digitized by Google

The principal danger points to be guarded in summer are Key West, Punta Gorda, Port Tampa, Pensacola and Apalachicola. If the Health Officer is at either one of these ports and a vessel with an epidemic arrives at one of the other ports, it is necessary that he should have a vessel at his command to go at once to the threatened point. During summer there are but two steamers per week between Key West and Tampa, and none between either of the other ports. The delay which would be caused if the State Health Officer had no steamer at his command might allow yellow fever or other epidemic diseases to enter one of our ports and spread devastation and death over our State. Should a vessel with yellow fever or other epidemic disease on board arrive at any of these ports a steamer is necessary to keep up communication with other ports, for if any mode of transportation be adopted other than by a vessel owned by the health authorities, and duly disinfected, it would be the means of spreading the disease instead of checking it. It may cost something to maintain this steamer and the health organization of the State, but when the life and health of the people of Florida are concerned, we cannot count the cost, nor can we weigh the benefits in scales held in parsimonious hands.

We therefore desire to encourage the hearty and generous support of the people of the State in properly maintaining the health authorities. The recent Congressional Committee which visited Mullet Key pronounced the station one of the most complete and efficient in the United States. We also visited the office of the Secretary and Health Officer in Jacksonville, and found the same a model of neatness and system. In conclusion, we feel free to say that, with the present efficient State Board and the indefatigable and energetic Dr. J. Y. Porter as State Health Officer, we have little to fear and much to hope for.

Respectfully submitted,

A. W. McLERAN,
Committee on part of the Senate.

A. S. GOODBREAD,
C. L. WILDER,
Com. on part of the House of Representatives.

Digitized by Google

COUNTY HEALTH OFFICIALS.

The following gentlemen have been appointed and commissioned "Agents of the State Board of Health," in and for their respective counties:

Alachua County—Dr. R. A. Lancaster, Gainesville.
Columbia County—Dr. W. R. Chalker, Lake City.
DeSoto County—Dr. Luby S. Smith, Arcadia.
Gadsden County—Dr. George W. Lamar, Quincy.
Hamilton County—Dr. D. M. Smith, Jasper.
Hillsborough County—Dr. L. W. Weedon, Tampa.
Jackson County—Dr. Theo. West, Marianna.
Jefferson County—Dr. Theodore Turnbull, Monticello.
Lake County—Dr. R. L. Bryans, Leesburg.
Leon County—Dr. Henry Palmer, Tallahassee.
Levy County—Dr. R. T. Walker, Cedar Key.
Manatee County—Hon. E. M. Graham, Braidentown.
Marion County—Dr. W. V. Newsom, Ocala.
Monroe County—Dr. C. B. Sweeting, Key West.
Nassau County—Dr. J. L. Horsey, Fernandina.
Orange County—Dr. F. H. Caldwell, Sanford.
Polk County—Dr. F. M. Wilson, Bartow.
Putnam County—Dr. G. E. Welch, Palatka.
St. Johns County—Dr. Lawrence Alexander, St. Augustine.
Santa Rosa County—Dr. C. E. McDougall, Milton.
Suwanee County—Dr. H. F. Airth, Live Oak.
Volusia County—Dr. H. K. DuBois, Port Orange.
Walton County—Dr. C. A. Landrum, DeFuniak Springs.
Washington County—Dr. F. C. Wilson, Chipley.

INSTRUCTIONS TO AGENTS.

To all Agents of the State Board of Health:

SIR:—As Health Officer and Agent of the State Board of Health in and for the county for which you have been appointed, it is expected that:

1st. You will keep yourself and the State Board of

Digitized by Google

Health well informed of the general health and sanitary condition of the different sections of your county.

2nd. You will do all you can to aid and promote the cause of public health in your county.

3rd. You will be the State Board's representative, and as such, you will be referred matters of local interest demanding investigation and remedy.

4th. You will exert your influence towards having the Rules and Regulations of the State Board of Health observed.

5th. You will endeavor to personally encourage a sentiment in favor of vaccination and re-vaccination of the inhabitants of your section, particularly school children and factory operatives.

6th. The State Board of Health will expect from you as often, and in as full and detailed a manner as possible, a report on the general health, sanitary necessities, hygienic conditions and like matters, bearing on the public health of your county.

7th. In the case of any reports of suspicious quarantinable contagious sickness, you will at once investigate the same and report, by wire, to the State Board of Health, or the State Health Officer, at Jacksonville, Florida; isolating the patient and premises, if necessary, but on no account must you exercise the authority of quarantine against disease appearing outside of your county jurisdiction, without the consent of the State Health Officer. Persons recently from localities declared by the State Board of Health to be infected with a quarantinable contagious disease may be placed by you under observance or surveillance, by forbidding them, under penalty of arrest to leave their premises or hold communication with any one, except through or by your directions, until the incubative period of the suspected disease has elapsed; provided, however, that persons holding health certificates of immunity to the quarantinable disease against which restrictions are placed and also certificates of proper disinfection of clothing, issued by the State Board of Health, its agents, officers of the U. S. Marine Hospital Service and City Health officials, will not be subjected to detention or be restricted in their movements.

Digitized by Google

The desirable qualities in a health officer are firmness, decision, self-possession and good judgment, and these, if linked with kindness, attention and carefulness in details of work, can never fail to inspire confidence, without which a health officer's work will be barren of good results. "Give every man thine ear but few thy voice," is a excellent advice to a health officer as it was to the son of Polonius. Pay respectful attention to all complaints and listen to all rumors, but be slow to make decision before carefully and calmly weighing all facts. In times of suspicious or epidemic sickness, at home or abroad, maintain a cool head and calm deportment. Do not yourself, and discourage in your associates in health matters, any inclination to indulge in myterious nods, whisperings and secret meetings. Such a course inspires distrust instead of confidence, and alarms the timid and nervous. Be frank, truthful and candid with the people and they will show their appreciation of your acts by evidencing additional confidence and faith in your ability and authority, and by attending to their business cares, thus permitting you to discharge yours without annoying and harrassing suggestions.

Sanitation and hygiene being the copartners of education, it is necessary, therefore, that the health officer should be a teacher in this line. Every opportunity should be embraced by you to impress the public and its servants, county officials and the town council with the necessity for cleanliness in cities and the benefits to individuals and communities always resulting from the observance of hygienic and sanitary laws.

Respectfully,

JOSEPH Y. PORTER, M. D.,
Health Officer.

MARATIME STATISTICS PORT OF FERNANDINA, 1893.

During the year 1893 the total number of vessels entering this port from foreign and domestic coastwise ports were three hundred and one (301).

Of the above number sixty-five (65) were foreign

Digitized by Google

steamships, arriving from the following ports, viz: Swansea, St. Lucia, Para, Liverpool, Kingston, Jamaica, Hamburg, Bermuda, Tampico, Los Palmas, Teneriffe, Canary Islands, Montreal Canada, Barry, Genoa, Bilboa, New Castle, Madeira, St. Domingo, Martinique, Caibarien, Matanzas, Havana Cuba, St. Thomas.

Of these ports the following were officially reported infected by cholera, viz: Teneriffe, Hamburg, Liverpool, Genoa, Bilboa, and the following infected by yellow fever, viz: Para, Havana and Matanzas, Cuba.

In addition to the above mentioned steamships, there also entered this port forty-six (46) sailing vessels from the following foreign ports, viz: Martinique, Barbadose, Trinidad, Gaudeloupe, Port au Spain, Nassau, St. Thomas, Havana, Cardenas, Sagua la Grande, Neuvitas, Cienfuegos, St. Croix, Belize, St. Lucia, Lagasyra, Pernambuco, Para, Porto Rico, Savanna la Mar, Bermuda, Antigua, Los Palmas, Canary Islands, St. Christopher.

Of these ports the following were officially reported infected by yellow fever, viz: Para, Pernambuco, Cienfuegos, Havana, Neuvitas, Sagua le Grande.

From the above it will be seen that during the year 1893 vessels entered directly from five (5) cholera infected ports and eight (8) yellow fever infected ports, and out of the total number 301 entering the port, one hundred and eleven (111) were from either infected ports or ports suspected as infected.

All of these vessels required disinfection and the usual detention thereafter.

Digitized by Google

STATEMENT OF RECEIPTS AND DISBURSEMENTS OF THE ESCAMBIA COUNTY BOARD OF HEALTH, FROM NOV. 1st, 1892, TO NOV. 1st, 1893.

To Amount on hand	$10,792.55	
" Inspection fees	5,155.00	
" Ballast fees	9,774.75	
" Fumigation fees	6,396.00	
" Miscellaneous fees	160.50	
" State Health Officer, (In trust)	388.12	
	$32,666.92	
By Salary of President		$1,200.00
" " of Secretary and Trsasurer		900.00
" Per diem of Members		114.00
" Salary of Attorney		300.00
" " " Three Sanitary Inspectors		1,955.00
" " " Port Inspector		2,400.00
" " " Mail boat		478.50
" " " Other Employes		4,194.50
" Office rent, telephone, furniture and incid'ts		607,44
" Stationery, printing and reports		131.15
" Connty inspection expense		90.25
" Postage		30.50
" Ditch and drain laborers		901.00
" Garbage burner		66.25
" Attorney fees in suits		206.00
" Insurance on plant and station		279.90
" Tug-boat service		201.50
" Telegraph service		30.10
" Launch fixtures and fuel for same		1,668·82
" Nurses at Station Hospital		34.50
" Returned fees to vessels		28.50
" Traveling expenses		375.00
" Disinfecting and repairing in city		598.35
" Autopsies		40.00
" Expert services		7.00
" Ass't Pt. Insp., Dr. W. E. Anderson		250.00
" New buildings at station		2,386.05
" Crib repair and extension		818.91
" Sulphur, $815.73; Lime, $240.25; Coal, $228.15		1,316.53
" Water, $72; Rations, $1,233.25 and Incidentals, $165.13		1,470.38
" Sundry bills for State Health Officer, (In trust)		388.12
Balance on hand		9,198.67
		$32,666.92

Respectfully submitted,

D. G. BRENT, Sec. and Treas.,
Board of Health.

Digitized by Google

ANNUAL STATEMENT OF THE FRANKLIN COUNTY BOARD OF HEALTH TO STATE BOARD OF HEALTH FROM MAY 1ST TO NOV. 15TH, FROM BEGINNING TO END OF QUARANTINE SEASON OF 1893.

Receipts—Paid by Inspector to Treasurer.

MONTH.	Fumigation.	Inspection.	Ballast Discharge.	Other Service.	Total.
May	$ 70 50	$ 67 00	....	....	$ 137 50
June	172 51	42 00	$ 166 00	$ 10 00	390 51
July	183 02	74 00	97 50	15 00	369 52
August	....	32 00	....	....	32 00
September	194 00	82 00	104 00	10 00	390 00
October	101 00	62 00	....	....	163 00
November	....	42 00	....	....	42 00
	$ 721 03	$ 401 00	$ 367 50	$ 35 00	$ 1,524 53

Digitized by Google

DISBURSEMENTS.

Persons to Whom Paid.	Purpose for Which Paid.	Sum Paid.
Rush & Marler, Druggists	Sulphur, copperas, mercury, etc., for entire season	$ 153 50
J. D. Rush, President Board	For 12 meetings during season	24 00
Jno. G. Ruge, Member Board	For 12 meetings during season	24 00
J. H. Lockwood, Member Board	For 11 meetings during season	22 00
Jno. G. Ruge, Sec. and Treas	Salary March 1 to Dec 1, 9 mos. at $10	90 00
Joseph Lawrence, Special Insp.	House to house inspection May 1 to Nov. 1, 6 mos. at $25	150 00
Thos. Gilbert, Printer	Blanks, stationery, etc., for season	9 70
A. A. Lind, Boatman	Hire sloop boat "Ellen" and crew quarantine boat May 1 to Nov. 15	395 50
C. H. Lind, Inspector	Salary as Port Inspector May 1 to Nov. 15, at $60 mo. and expenses	390 65
Schooner Rambler and crew	Discharge ballast 3 ships	180 00
Sch'r H. C. Sharit and crew	Discharge ballast 1 ship	50 00
H. Ruge & Sons	Lime and brushes, etc., $3 70 Stationery, seal, etc., 7 05 Exchange and discounts, collection ships drafts 13 87	24 62
J. E. Grady, Senator	Telegrams, postage, clerks' hire, etc., Legislative expenses	20 00
M. Lind	Flags for season	5 09
Sch'r "Willie Glover" and crew	Special inspection trip and guards	8 50
Sloop Alexander and crew	Special inspection trip and guards	10 00
W. A. Lockwood & Co	Fumigating pans, etc	13 95
Wm. McCormick & est. Mrs. Poland	Clothing and effects destroyed	70 10
A. & M. T. Co	Telegrams	10 24
J. D. Rush	Special clerical services, statistical reports, etc., for season	25 00
	Total disbursement	$ 1,676 76

RECAPITULATION.

May 10, 1893.	Balance on hand	$1,186 64
	Receipts	1,524 53
		$2,711 17
	Disbursements	$1,676 76
	Balance on hand close season Nov. 15, 1893	$1,034 41

Respectfully submitted,

FRANKLIN COUNTY ROARD HEALTH,
By JOHN G. RUGE, Sec. and Treas.

Apalachicola, Fla.

Digitized by Google

OPERATIONS BOCA GRANDE INSPECTION STATION (ENTRANCE TO CHARLOTTE HARBOR) FROM MAY 1st, 1893, TO MARCH 31st, 1894.

	No. of Vessels Inspected.	No. of Vessels Disinfect'd	Amount of Tonnage.	No. of Passengers.	No. of Crew.	Amount of Fees Collected.	Cost of Maintenance.
May	5	*	4,768	. .	81	$20 00	$220 00
June	7	*	5,129	. .	149	20 00	219 62
July . . .	6	*	4,951	. .	100	20 00	209 10
August . . .	4	*	5,259	1	80	30 00	205 09
September . .	8	*	6,846	1	118	60 00	218 87
October . . .	6	*	3,644	. .	74	45 00	210 44
November . .	10	*	5,965	12	102	80 00	164 10
December . .	3	*	1,828	. .	37	35 00	50 00
January . . .	4	*	5,176	. .	77	55 00	125 00
February . .	1	*	1,212	. .	22	15 00	125 00
March	6	*	7,943	. .	136	90 00	125 00
Totals . . .	60	*	52,721	14	976	$470 00	$1,872 22

*No vessels disinfected at this station; all such sent to one of the steam sterilizing plants.

Digitized by Google

OPERATIONS MAYPORT INSPECTION STATION (MOUTH ST. JOHNS RIVER) AUGUST, 1893, TO MARCH 31st, 1894.

	No. of Vessels Inspected.	No. Vessels Disinfected.	Amount of Tonnage.	No. of Passengers.	No. of Crew.	Amount of Fees Collected.	Cost of Maintenance.
August . . .	25	*	21,519	256	495	$175 00	$ 75 00
September . .	30	*	25,555	766	691	212 50	75 00
October . . .	31	*	29,452	1,423	746	232 50	75 00
November . .	24	*	17,509	687	440	190 00	52 50
December . .	4	*	927	0	30	30 00	30 00
January . . .	5	*	611	3	34	30 00	30 00
February . .	3	*	696	0	20	25 00	33 00
March	5	*	658	5	37	30 00	31 50
Totals	127	*	97,027	3,140	2,503	$925 00	$402 00

*No vessels disinfected at this station ; all such sent to one of the steam sterilizing plants.

Digitized by Google

OPERATIONS FERNANDINA STATION FROM AUGUST 1, 1893, TO MARCH 31, 1894.

	Number of Vessels Inspected.	No. Vessels Disinfected.	Amount of Tonnage.	Number of Passengers.	Number of Crew.	Amount of Fees Collected.	Cost of Maintenance.
August	20	3	15,486	25	307	$ 328 75	$ 273 50
September. . .	23	6	15,919	1	283	655 00	358 98
October	17	3	10,326	0	188	361 00	232 50
November. . .	14	3	11,064	2	225	205 00	197 50
December . . .	16	0	11,604	0	236	185 00	156 00
January	9	0	7,357	0	127	105 00	155 00
February . . .	4	0	1,525	0	31	40 00	155 00
March	12	0	9,372	3	182	155 00	155 00
Total . . .	115	15	82,653	31	1,579	$ 2,189 75	$ 1,683 48

Digitized by Google

OPERATIONS STATE QUARANTINE INSPECTION AND DISINFECTION STATIONS.

	Number of Vessels Inspected.	Number of Vessels Disinfected.	Amount of Tonnage.	Number of Passengers.	Number of Crew.	Amount of Fees Collected.	Cost of Maintenance.
Mullet Key* .	284	88	158,439	2,733	5,888	$ 5,052 50	$ 4,641 73
Boca Grande *	60	**	52,751	976	14	470 00	1,872 22
Mayport ‡ . .	127	**	97,027	3,140	2,503	925 00	402 00
Key West ‡ .	314	**	190,204	6,854	8,216	1,976 75	1,285 13
Fernandina‡ .	115	15	82,653	31	1,579	2,189 75	1,683 48
Total . . .	900	103	581,074	13,734	18,200	$10,614 00	$ 9,884 56

* This is exhibit of operations from May 1, 1893, to March 31, 1894.

‡ This is statement of operations from August 1, 1893, to March 31, 1894.

** No vessels disinfected at these stations; all such sent to one of the steam disinfecting plants.

Digitized by Google

OPERATIONS KEY WEST QUARANTINE STATION, AUGUST 1st, 1893 TO MARCH 31st, 1894,

	Number of Vessels Inspected.	No. Vessels Disinfected.	Amount of Tonnage.	No. of Passengers.	No. of Crew.	Amount of fees Collected.	Cost of Maintenance.
August	45	*	33,595	1,080	1,432	$125 25	$ 160 00
September . .	46	*	38,867	1,120	1,608	182 25	160 00
October. . . .	41	*	29,762	934	1,023	289 00	160 00
November . . .	31	*	19,823	863	947	310 25	160 00
December . . .	23	*	14,821	557	668	229 25	160 00
January	25	*	14,933	599	728	255 00	165 13
February. . .	28	*	18,642	727	802	290 00	160 00
March.	35	*	20,256	976	1,013	302 75	160 00
Totals	314	*	190,204	6,854	8,216	$1,976 75	$1,285 13

*No vessels disinfected at this station; all such sent to steam disinfecting plants at Tortugas or Mullet Key.

Digitized by Google

OPERATIONS MULLET KEY STATION, FROM MAY 1st, 1893, TO MARCH 31st, 1894.

	Number of Vessels Inspected.	No. Vessels Disinfected.	Amount of Tonnage.	No. of Passengers.	No. of Crew.	Amount of fees Collected.	Cost of Maintenance.
May.	40	14	20,221	595	879	$1,956 00	$529 67
June	39	16	18,223	571	889	696 50	521 42
July	40	13	22,299	392	950	450 00	523 98
August. . . .	42	11	25,628	315	910	317 50	512 98
September. .	41	10	15,630	253	713	342 50	487 30
October	43	17	23,486	323	868	682 50	483 40
November . .	17	7	9,931	212	393	327 50	548 67
December. . .	4	0	3,113	0	37	40 00	257 00
January . . .	3	0	2,418	19	55	35 00	255 00
February . .	7	0	7,658	0	0	95 00	260 31
March	8	0	9,832	53	194	110 00	262 00
Total, . . .	284	88	158,439	2,733	5,888	$5,052 50	$4,641 73

Digitized by Google

	BIRTHS.									MARRIAG'S			DEATHS.				
	LEGITIMATE.				ILLEGITIMATE.								W		C		
	White.		Colored.		White		Colored										
	M	F	M	F	M	F	M	F	Total.	White.	Colored.	Total.	M	F	M	F	Total.
January	120	124	67	56	2	1	3	8	381	153	167	320	98	70	77	49	294
February	107	98	61	38	0	0	2	3	309	149	119	268	87	62	42	39	230
March	123	94	56	52	4	2	6	5	342	169	139	308	95	63	58	49	265
April	107	72	51	32	1	2	2	5	272	129	110	239	89	80	59	50	278
May	80	54	43	39	2	1	3	4	226	132	87	219	87	56	50	50	243
June	54	89	16	25	2	2	3	3	144	201	151	352	51	48	41	40	180
July	140	116	43	56	0	0	0	3	358	171	151	322	69	58	46	38	211
August	154	145	72	58	1	0	1	6	437	163	130	293	77	108	52	42	279
September	182	168	78	59	1	1	3	4	496	160	139	299	75	92	46	48	261
October	204	175	84	59	0	0	1	2	525	211	164	375	105	90	57	63	315
November	188	191	76	52	2	0	1	3	513	223	189	412	118	96	66	59	339
December	202	177	60	86	0	0	1	2	528	363	295	658	117	89	69	49	324
Totals	1661	1453	707	612	15	9	26	48	4527	2224	1841	4067	1068	902	673	576	3219

Digitized by Google

AGES OF DECEDENTS, 1893.

	White		Colored		Total
	M	F	M	F	
Under 1 year	221	189	166	144	720
Between 1 and 5 years	96	92	50	50	288
" 5 " 10 "	33	40	23	17	133
" 10 " 15 "	35	20	12	20	87
" 15 " 20 "	33	44	29	27	133
" 20 " 25 "	72	60	61	56	249
" 25 " 30 "	51	58	44	32	185
" 30 " 40 "	116	81	86	69	352
" 40 " 50 "	96	72	48	44	260
" 50 " 60 "	94	73	48	27	242
" 60 " 70 "	81	88	41	33	243
" 70 " 80 "	77	46	27	22	172
" 80 " 90 "	31	23	15	13	82
" 90 " 100 "	3	1	2	5	11
Over 100 years			1	3	4
Not stated	29	25	10	14	78
Total	1,068	912	663	576	3,219

Average age White decedents, . . 30.13.
" " Colored " . . 26.71.
Total average age of decedents, . . 28.42.

Digitized by Google

BIRTH RATES.

	1891	1892	1893	Total
January	15.33	15.73	15.39	15.48
February	13.49	12.14	13.13	12.92
March	16.81	15.07	13.68	15.18
April	14.66	16.82	11.44	14.31
May	11.66	14.95	12.02	12.87
June	15.93	12.87	12.49	13.76
July	14.39	14.62	11.67	13.56
August	15.93	18.34	11.17	15.14
September	16.69	15.57	15.21	15.82
October	11.08	15.62	16.09	14.26
November	13.46	17.45	15.72	15.54
December	17.11	15.96	16.18	16.41
Whole Year	14.72	15.42	13.68	14.61

BIRTHS—1893.

	White.		Colored		Total
	M	F.	M	F	
Legitimate	1,659	1,451	707	612	4,429
Illegitimate	15	9	26	48	98
Total	1,674	1,460	733	660	4,527

Digitized by Google

MORTALITY OF TWELVE DISEASES OF SPECIAL SIGNIFICANCE CLASSIFIED BY MONTHS.

1893.	January.	February.	March.	April.	May.	June.	July.	August.	September.	October.	November.	December.	Total.
Consumption	35	33	38	33	33	19	13	30	29	38	47	37	385
Cholera Infantum	2	3	4	11	13	16	3	13	4	8	5	5	87
Diarrhoea	3	3	8	10	9	12	5	14	4	3	5	7	83
Diphtheria	2	0	1	0	0	0	0	0	0	1	1	0	5
Fever (Malarial)	5	7	11	13	10	9	27	33	20	23	16	7	183
Fever (Typhoid)	6	5	3	5	8	3	15	11	6	12	6	3	87
Heart Disease	11	11	13	9	6	5	8	14	14	17	17	10	129
Marasmus	5	1	2	5	13	5	6	4	4	5	6	3	59
Measles	2	0	0	1	0	0	0	0	0	0	0	0	3
Meningitis	5	7	4	6	8	0	8	6	6	3	5	3	61
Pneumonia	23	18	17	14	7	3	1	3	2	5	24	45	162
Small Pox*	0	0	1	0	0	0	0	0	0	0	0	0	1

*This case was discussed in the Fourth Annual Report.

DEATHS—1893.

	Males	Females	Total
White	1,068	912	1,980
Colored	663	576	1,239
Total	1,731	1,488	3,219

Digitized by Google

DEATH RATES.

	1891	1992	1893	Total
January	16.19	16.65	11.07	14.63
February	13.02	12.41	9.82	11.75
March	12.36	14.91	10.60	12.62
April	13.22	14.35	11.87	13.14
May	11.75	18.51	12.92	14.39
June	12.64	15.22	9.94	12.60
July	16.24	13.75	6.88	12.29
August	13.33	14.27	9.24	12.28
September	12.37	10.39	8.01	10.25
October	12.66	13.41	9.65	11.90
November	14.23	11.40	10.39	12.01
December	11.58	11.03	9.93	10.84
Whole Year	13.22	13.86	10.02	12.36

BIRTHS, MARRIAGES AND DEATHS DURING THE YEAR 1893

CLASSIFIED BY MONTHS.

	Births.	Marriages.	Deaths.
January	381	320	294
February	309	268	230
March	342	308	265
April	268	239	278
May	226	219	243
June	144	352	180
July	358	322	211
August	437	293	279
September	496	299	261
October	525	375	315
November	513	412	339
December	528	658	324
Totals	4,527	4,067	3,219

Digitized by Google

BIRTHS, MARRIAGES AND DEATHS IN THE FORTY-FIVE COUNTIES OF THE STATE OF FLORIDA DURING THE YEAR 1893.

	Births.	Marriages.	Deaths.
Alachua	181	159	147
Baker	26	27	9
Bradford	101	94	53
Brevard	48	56	27
Calhoun	2	23	14
Citrus	23	21	10
Clay	34	29	14
Columbia	108	135	67
Dade	16	8	10
DeSoto	66	62	19
Duval*	54	431	21
Escambia*	107	238	87
Franklin	104	51	50
Gadsden	33	80	11
Hamilton	40	71	34
Hernando	22	26	17
Hillsborough	184	277	199
Holmes	24	44	5
Jackson	29	135	39
Jefferson	67	93	37
Lafayette	13	30	14
Lake	118	89	35
Lee	29	10	14
Leon	54	147	77
Levy	80	64	41
Liberty	7	18	1
Madison	37	68	39
Manatee	52	29	26
Marion	200	278	164
Monroe	623	241	487
Nassau	74	57	54
Orange	224	140	133
Osceola	68	40	28
Pasco	43	18	14
Polk	152	132	64
Putnam	108	128	78
St. Johns	73	71	52
Santa Rosa	49	94	43
Sumter	24	37	10
Suwanee	104	114	47
Taylor	31	27	17
Volusia	94	70	89
Wakulla	1	16	1
Walton	26	40	18
Washington	28	26	14
Jacksonville*	576	. .	540
Pensacola*	366	. .	255
Totals	4,527	4,067	3,219

*Duval and Escambia counties do not include the cities of Jacksonville and Pensacola, as their returns are reported separately under the headings "Jacksonville" and "Pensacola."

8 b h

Digitized by Google

POPULATION OF COUNTIES.

Alachua*	22,934	Levy*	6,586
Baker	3,333	Liberty	1,452
Bradford	7,516	Madison	14,316
Brevard	3,401	Manatee*	2,895
Calhoun	1,681	Marion*	20,796
Citrus	2,394	Monroe*	18,786
Clay	5,154	Nassau*	8,294
Columbia*	12,877	Orange*	12,584
Dade	861	Osceola	3,133
DeSoto*	4,494	Pasco	4,249
Duval	26,800	Polk*	7,905
Escambia	20,188	Putnam*	11,186
Franklin	3,308	St. Johns*	8,712
Gadsden*	11,894	Santa Rosa*	7,961
Hamilton*	8,507	Sumter	5,363
Hernando	2,476	Suwanee*	10,524
Hillsboro*	14,941	Taylor	2,122
Holmes	4,336	Volusia*	8,467
Jackson*	17,544	Wakulla	3,117
Jefferson*	15,757	Walton	4,816
Lafayette	3,686	Washington*	6,426
Lake	8,034		
Lee	1,414	The State	391,422
Leon*	17,752		

*The State Board of Health has an Agent in the Counties marked with the asterisk. (*)

Digitized by Google

| | | |

THE NEW YORK
PUBLIC LIBRARY
ASTOR, LENOX AND
TILDEN FOUNDATIONS.

Digitized by Google

Digitized by Google

Digitized by Google

Digitized by Google

Digitized by Google

Digitized by Google

THE NEW YORK PUBLIC LIBRARY
REFERENCE DEPARTMENT

This book is under no circumstances to be taken from the Building
